

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra H. Mordecai
Secretary of State
OF CORPORATIONS

1995 *5-10-95*

B-6688 NC

DOCUMENT # **K85813**

(9)

1. Corporation Name

EL PALACIO DE LOS JUGOS, INC.

**APPROVED
AND
FILED**

MAY 11 11:10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

**5721 W FLAGLER ST
MIAMI FL 33144-3433**

Mailing Address

**5721 W FLAGLER ST
MIAMI FL 33144-3433**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **05/05/1989** 3a. Date of Last Report **03/22/1994**

2. Principal Place of Business

21

2a. Mailing Address

26

4. FEI Number
65-0118619

Applied For
Not Applicable

State Apt # etc

State Apt # etc

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

City & State

City & State

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

22

27

8. This corporation has liability for intangible tax under s. 196(1)(a), Florida Statutes. Yes No

23

28

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BERMUDEZ, REY
541 E 38 ST
HIALEAH FL 33013**

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607 (2)(b), (2)(c), and 607 (2)(d) 1989 Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607 (2)(b), Florida Statutes.

SIGNATURE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (LINE 1)

14.

NAME: **PD BERMUDEZ, REY**
STREET ADDRESS: **541 E 38 ST**
CITY: **HIALEAH FL**

1. NAME

Change Addition

15.

NAME: **STD BERMUDEZ, APOLONIA**
STREET ADDRESS: **541 E 38 ST**
CITY: **HIALEAH FL**

2. NAME

Change Addition

16.

NAME: **STD BERMUDEZ, APOLONIA**
STREET ADDRESS: **541 E 38 ST**
CITY: **HIALEAH FL**

3. NAME

Change Addition

17.

NAME: **STD BERMUDEZ, APOLONIA**
STREET ADDRESS: **541 E 38 ST**
CITY: **HIALEAH FL**

4. NAME

Change Addition

18.

NAME: **STD BERMUDEZ, APOLONIA**
STREET ADDRESS: **541 E 38 ST**
CITY: **HIALEAH FL**

5. NAME

Change Addition

19.

NAME: **STD BERMUDEZ, APOLONIA**
STREET ADDRESS: **541 E 38 ST**
CITY: **HIALEAH FL**

6. NAME

Change Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 339.02(2)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath that I am an officer or director of the corporation or that I am an authorized agent empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 1, or Block 13, if changed, on an attached form with my address.

SIGNATURE:

SIGNATURE AND TYPE ON PRINTED LINE OF REGISTERED OFFICER OR DIRECTOR

5/5/95

FD-204 (REV. 8-82)