

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 16, 2000 8:00 am
Secretary of State

03-16-2000 90071 010 ***150.00

DOCUMENT # M22671

1. Entity Name
LA CARRETA RESTAURANT V, INC.

Principal Place of Business

700 SW 36TH AVE.
 MIAMI FL 33135

Mailing Address

700 SW 36TH AVE.
 MIAMI FL 33135-4124

2. Principal Place of Business

3663 S.W. 8TH STREET

Suite, Apt. #, etc.
THIRD FLOOR

City & State
MIAMI, FLORIDA

Zip
33135

Country
USA

3. Mailing Address

3663 S.W. 8TH STREET

Suite, Apt. #, etc.
THIRD FLOOR

City & State
MIAMI, FLORIDA

Zip
33135

Country
USA



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-2594864**

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

VALLS, FELIPE A.
3663 S.W. 8TH STREET THIRD FLOOR
MIAMI FL

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** Delete
 NAME **VALLS, FELIPE A SR**
 STREET ADDRESS **3663 S.W. 8TH STREET THIRD FLOOR**
 CITY-ST-ZIP **MIAMI FL**

TITLE **PRESIDENT** Change Addition
 NAME **VALLS, FELIPE A JR**
 STREET ADDRESS **3663 S.W. 8TH ST, THIRD FLOOR**
 CITY-ST-ZIP **MIAMI, FL 33135**

TITLE **S** Delete
 NAME **VALLS, FELIPE A JR**
 STREET ADDRESS **3663 S.W. 8TH STREET THIRD FLOOR**
 CITY-ST-ZIP **MIAMI FL**

TITLE **SECRETARY** Change Addition
 NAME **VALLS FELIPE A Sr**
 STREET ADDRESS **3663 S.W. 8TH ST, THIRD FLOOR**
 CITY-ST-ZIP **MIAMI, FL 33135**

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
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TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental reports 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 the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Felipe A Valls, Jr* **FELIPE AVALLS, JR** **PRESIDENT** **2/2/2000** **305-4464916**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)