## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

**CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P95000000134 (3)

MARIANO SEVILLA, INC.

Principal Place of Business	Mailing Address	
2406 N.W. 20TH STREET MIAMI FL 33142 US	2406 N.W. 20TH STREET Miami FL 33142 US	

**FILED** Sep 09 1997 8:00am Secretary of State



Principal P	face of Business	Mailing Address						
2406 N.W. 20TH STREET MIAMI FL 33142		2406 N.W. 20TH STREET Miami Fl 33142						
US		U\$				DO NOT WRITE		
						3. Date Incorporated or Qualified 01/02/1995	3a. Date of La 05/23/19	•
2. Principa	al Place of Business	2a. Mailing Address				4. FEI Number		Applied For
21		26				65-0545746		Not Applicable
Sulte, A	pt. #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	7	Applied For Not Applicable  5 Additional Required  00 May Be ed to Fees Intangible No  Interpretation No  ORS IN 12  Ge Addition  De Addition  Addition  Addition
City & S	State	City & State				6. Election Campaign Financing	\$5.	00 May Be
23		28				Trust Fund Contribution		ded to Fees
Zip	Country	Zip	Cou	ntry		8. This corporation owes or has pai	d the current year	ır İntangible
24	25	29	30			Personal Property Tax due June		□ No
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Reg	Istered Agent	
	SEVILLA, MARIANO J		-	81	Name			
	480 West 66th St.		ł	B2	Street Add	ress (P.O. Box Number is Not Acceptabl	e)	<del></del>
	HIALEAH FL 33012				01100171001	( .e. bex ( a.m.e i e ter tereplate	~,	
				<b>B3</b>				
				84	City		FL 85	Zip Code
44 0	- 1 - Ma delana al Cantinno CO7 OC	00 and CO7 4500 Storida Ptatut	an the ok		nomed sou	poration submits this statement for the pr		na ita rapistoras
office	or regi <b>ste</b> red agent, or both, in the State . I am familiar with, and accept the oblig	e of Florida. Such change was a	authorized	d bv	the corporal	tion's board of directors. I hereby accep	t the appointmen	nt as registered
SIGNATUR	RE Signature, typed or printed name of registered as	ont and title if applicable (NOT	E · Registered	i Agen	nt signature requi	red when reinstating)	DATE	
12.	OFFICERS AN	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC	TORS IN 12
TITLE	0	☐ DELETE	1.110	TLE			□ Cha	nge 🔲 Additio
NAME	<b>SEVILLA, MARIANO J</b>		1.2 NA	ME				
STREET ADDRE			1.3 ST	REET A	ADDRESS			
CITY-ST-ZIP	HIALEAH FL		1.4 CI	TY-\$T	-ZIP			
TITLE		☐ DELETE	2.1 1(1	TL€			☐ Cha	nge 🔲 Additio
NAME			2.2 NA	ME				
STREET ADDRE	ess		2.3 ST	REET A	ADDRESS			
CITY-ST-ZIP			2.4 C	ITY - \$1	1-2IP			
TITLE		☐ DELETE	3.1 Til	TLE			Cha	nge 🔲 Additio
NAME			3.2 NA	ME				
STREET ADDRE	ess		3.3 \$1	REET	address			
CITY-ST-ZIP			3.4. CI	ITY - ST	T-ZIP			
TITLE		DELETE	4.1 70				Cha	nge 🔲 Additio
NAME			4. 2 N	AME				
STREET ADDRE	ESS		4.3 ST	TABET A	ADDRESS			
CITY-ST-ZIP			4.4 CT	TY-ST	:- ZIP			
TITLE		☐ DELETÉ	5.1 1/1				☐ Cha	nge 🔲 Additio
NAME			52 N/	AME				
STREET ADDRE	ESS				address			
CITY-ST-ZIP				TY-ST				
TITLE		DELETE	6.1 TJ				☐ Cha	nge 🔲 Additio
NAME			6.2 N/					
STREET ADDRE	200				ADDRESS			
CITY-ST-ZIP				TY-ST	I .			
0111 - 01 - 61F			_ 0.,0,		<del></del>			

14. I do 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 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 the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.