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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortharh Secretary of State DIVISION OF CORPORATIONS

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DOCUMENT # THE BUCA GUILD, INC. Mailing Address Principal Place of Business 6373 N.W. 23RD STREET 6373 N.W. 23RD STREET **BOCA RATON FL 33434 BOCA RATON FL 33434** 3. Date Incorporated or Qualified 3a. Date of Last Report 07/14/1995 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 65-0610062 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State \$5.00 May Be 6. Election Campaign Financing City & State \Box Trust Fund Contribution Added to Fees 28 23 This corporation has liability for intangible tax under s 199.032, Country Zια Ζıp Country Florida Statutes Sees No

10. Name and Address of New Registered Agent 24 25 29 30 9. Name and Address of Current Registered Agent Name WLMC REGISTERED AGENTS, INC. Street Address (P.O. Box Number is Not Acceptable) 82 701 BRICKELL AVENUE 83 **SUITE 2000 MIAMI FL 33131** City **B**5 Zip Code 11. Pureuant to the provisions of Sections 607.0502 and 607.1508, 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 dorporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE DATE (NOTE Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. ☐ Addition DELETE Change 1. 1 TITLE TITLE 1.2 NAME SANTOS, ENRIQUE P NAME 1.3 STREET ADDRESS CALLE 9 #15-89 STREET ADDRESS BUCARAMANGA, COLOMBIA 1.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition T DELETE 2 1 TITLE TIFLE Jaimes. Yolanda P 22 NAME NAME CARRERA 24 #36-30 2.3 STREET ADDRESS STREET ADDRESS BUCARAMANGA, COLOMBIA 24 CTY-ST-ZIP CHY-ST-ZIP [] Change ■ Addition DELETE 3 1 THILE BILE FLOREZ, SONIA EUGENIA G 32 NAME NAME CARRERA 27 #51-55 3 3. STREET ADDRESS STREET ADDRESS BUCARAMANGA, COLOMBIA 34 CFTY-ST-ZIP CITY-S1-ZIP 10000180127% -04/30/36--01072--008 DELETE 4. 1 TITLE TITLE A., LUPO V 4 2 NAME NAME ***200.00 CALLE 113 #22-18/24 4 3 STREET ADDRESS STREET ADDRESS BUCARAMANGA, COLOMBIA 4.4 CTY-ST-ZIP CITY - ST - ZIP ☐ Change Addition DELETE 5. 1 TITLE 10116 VELAZCO, LUIS F 5.2 NAME NAME CARRERA 16 #41-29 5.3 STREET ADDRESS STREET ADDRESS **BUCARAMANGA, COLOMBIA** 54 CITY-ST-ZIP CITY - S1 - ZIF ☐ Addition **DE** DELETE TITLE 6 1 TITLE BLOCH, RICHARD N 6.2 NAME NAME 6.3 STREET ADDRESS 6373 N.W. 23RD STREET STREET ADDRESS **BOCA RATON FL 33434** 6.4 CITY - ST - ZIP DITY-ST-ZIP

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 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this about report or supplemental annual report |s true and accurate and that my signature shall have the same legal effect as if made under eath; 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 oath; that I am an officer or director of the corp appears in Block 12 or Block 13 if changed or an attachment with an address.

SIGNATURE: SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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