

AMENDED

000006

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

FILED

99 OCT 22 AM 11:15

DOCUMENT # P 97000069558 1. Corporation Name

SECRETARY OF STATE TALLAHASSEE, FLORIDA

POLLO EL CAPORAL, INC.



Principal Place of Business Mailing Address 2656 SW 137th Ave. Miami, FL 33175 2656 SW 137th Ave. Miami, Florida 33175

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address 21. Suite, Apt. #, etc. 26. Suite, Apt. #, etc. 22. City & State 27. City & State 23. Zip 25. Country 28. Zip 29. Country 24. Zip 30. Country

3. Date Incorporated or Qualified 8/12/97 4. FEI Number 65-0773293 Applied For Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees 8. This corporation owes the current year Intangible Personal Property. Yes No

9. Name and Address of Current Registered Agent Lázo, Pedro 1351 SW 70th Avenue Miami, Florida 33144

10. Name and Address of New Registered Agent 81 Name Alberto Ley 82 Street Address (P.O. Box Number is Not Acceptable) 2656 S.W. 137th Avenue 83 84 City Miami FL 85 Zip Code 33175

11. Pursuant 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 corporation'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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature is required when appointing) DATE 10/20/99

Table with 5 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP, and DELETE checkbox. Contains information for PVSTD LAZO, PEDRO.

Table with 5 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP, and Change/Addition checkboxes. Contains information for S, D LEY, ALBERTO D. and P, D, T EMY RODRIGUEZ.

CR2E034 (5/99)

14. 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 in the 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.

SIGNATURE: [Signature] DATE: 10/20/99 DAYTIME PHONE #