

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Mar 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **S22597** (6)
1. Corporation Name
LA REINA FOODS, INC.

Principal Place of Business 13065 SW 133 CT. MIAMI FL 33186	Mailing Address 13065 SW 133 CT. MIAMI FL 33186
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 13013 SW 122 AVE Suite, Apt. #, etc. 22 City & State 23 MIAMI FL Zip 24 33186		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30		3. Date Incorporated or Qualified 01/04/1991	
4. FEI Number 65-0239956		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 or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No			
9. Name and Address of Current Registered Agent CASTILLO, ANGEL JR 999 PONCE DE LEON BLVD. TENTH FLOOR, SUITE 1000 CORAL GABLES FL 33134				10. Name and Address of New Registered Agent 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 607.0502 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 required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PSD	☐ DELETE	1.1 TITLE	☒ Change ☐ Addition			
NAME	PIEDRAHITA, ALBERTO		1.2 NAME				
STREET ADDRESS	13065 S.W. 133 CT		1.3 STREET ADDRESS	13013 SW 122 AVE			
CITY-ST-ZIP	MIAMI FL 33186		1.4 CITY-ST-ZIP	MIAMI FL 33186			
TITLE	TD	☐ DELETE	2.1 TITLE	☒ Change ☐ Addition			
NAME	BALLESTEROS, MARTHA		2.2 NAME				
STREET ADDRESS	13065 S.W. 133 CT		2.3 STREET ADDRESS	13013 SW 122 AVE			
CITY-ST-ZIP	MIAMI FL 33186		2.4 CITY-ST-ZIP	MIAMI FL 33186			
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition			
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4 CITY-ST-ZIP				
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition			
NAME			4.2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP				
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition			
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition			
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP			6.4 CITY-ST-ZIP				

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 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.

SIGNATURE

ALBERTO PIEDRAHITA, Pte.

3/5/98

(305) 232-6449

CR2E034 (10/97)