

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # V24370

(1)

1. Corporation Name

LARIOS ON THE BEACH, INC.

Principal Place of Business

C/O ESTEFAN ENTERPRISES, INC.
6205 BIRD ROAD
MIAMI FL 33155

Mailing Address

C/O ESTEFAN ENTERPRISES, INC.
6205 BIRD ROAD
MIAMI FL 33155

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/27/1992

3a. Date of Last Report

05/01/1994

4. FEI Number

65-0326017

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 has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21. Suite, Apt. #, etc.

22. City & State

23. Zip

2a. Mailing Address

26. Suite, Apt. #, etc.

27. City & State

28. Zip

24. Country

25. Country

29. Country

30. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HERNANDEZ, LUIS F
C/O ESTEFAN ENTERPRISES INC.
6205 BIRD ROAD
MIAMI FL 33155

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 607.0602 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 607.0605, Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Secretary of State)

(Signature of Registered Agent or Secretary of State)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

NAME	POST
NAME	ESTEFAN, EMILIO J
STREET ADDRESS	6205 BIRD ROAD
CITY, ST, ZIP	MIAMI FL
NAME	S
NAME	FAJARDO, REBECCA
STREET ADDRESS	6205 BIRD ROAD
CITY, ST, ZIP	MIAMI FL
NAME	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
NAME	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
NAME	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

1. NAME	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	
5. NAME	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY, ST, ZIP	
9. NAME	☐ Change ☒ Addition
10. NAME	COMPTROLLER
11. STREET ADDRESS	LUIS F. HERNANDEZ
12. CITY, ST, ZIP	6205 BIRD ROAD
13. NAME	MIAMI, FLORIDA 33155
14. NAME	
15. NAME	
16. STREET ADDRESS	
17. CITY, ST, ZIP	
18. NAME	☐ Change ☐ Addition
19. NAME	
20. STREET ADDRESS	
21. CITY, ST, ZIP	
22. NAME	☐ Change ☐ Addition
23. NAME	
24. STREET ADDRESS	
25. CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.032, 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 201, Florida Statutes, and that my name appears in Block 12 or Block 13 of this document, or any attachment with an address.

SIGNATURE:

Luis F. Hernandez
SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR

4/28/1996

305-666-0291