

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000035668

**Entity Name:** RINCON ARGENTINO RESTAURANT #2, INC.

**Current Principal Place of Business:**

7744 N KENDALL DR  
MIAMI, FL 33156

**FILED**  
**Apr 21, 2013**  
**Secretary of State**  
**CC0061613932**

**Current Mailing Address:**

819 ANASTASIA AVE  
CORAL GABLES, FL 33134

**FEI Number: 65-1099776**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

DEMARZIANI, ILEANA  
819 ANASTASIA AVENUE  
CORAL GABLES, FL 33134 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           PTD  
Name           DEMARZIANI, ILEANA  
Address        819 ANASTASIA AVENUE  
City-State-Zip: CORAL GABLES FL 33134

Title           SVD  
Name           DEMARZIANI, MIGUEL  
Address        819 ANASTASIA AVENUE  
City-State-Zip: CORAL GABLES FL 33134

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: ILEANA DE MARZIANI**

**PRES.**

**04/21/2013**

Electronic Signature of Signing Officer/Director Detail

Date