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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

DIVISION OF CORPORATIONS

(1)

Secretary of State

APPROVEU AND FILED

98 MAY -1 AM 8: 45

SECRETARY OF STATE TALLAHASSEE. FLORIDA

LA CANASTILLA CUBANA DISTRIBI	JTING CORP.			
				Bil Billi Bilail Billi Billi III
Principal Place of Business	Mailing Address			EN BIBLORI BIBLIRANDI IDDI
2300 CORAL WAY	2300 CORAL WAY			
#200	#200			
MIAMI FL 33145	MIAMI FL 33145		DO NOT WRITE IN THI	S SPACE
			3. Date Incorporated or Qualified 12/03/1974	
2. Principal Place of Business	2a. Mailing Address	· · · · · · · · · · · · · · · · · · ·	4. FEI Number	Applied For
21 2300 CORAL WAY	26 2300 CORAL WA	\Y	59-1565398	Not Applicable
Suite, Apt. #, etc. 22 SUITE # 200	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State	City & State		6 50 10 5	Fee Required
23 MÍAMI, FLORIDA	28 MIAMI, FLORID		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country 24 33145 25 US	Z _{ip} [29] 33145	Country 30 US	8. This corporation owes or has paid the c	_ ' _ '
24 33145 25 US 9, Name and Address of Current	1-1-1	30 \	Personal Property Tax due June 30. 10. Name and Address of New Registere.	☐ Yes ☐ No
FLORIDA ANNUAL REPORT SERVICE	— ¬	81 Name	14 MILE CANIDOS DI 11031 TIESISIOIS	
2300 CORAL WAY	20 1110	00 000000000000000000000000000000000000	(0.0 B. N. starie New York)	
#200		82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
MIAMI FL 33145		83		
		84 City	F	85 Zip Code
11. Persuant to the/provisking of Sections 607.0502 office or registered anontror bight, in his glate o agent I am lamita, virit and Allerputhy styligh	and 607, 508, Florida Statutes	s, the above-named corp	oration submits this statement for the purpose	of changing its registered
agent. I am familiar with and delegating diving in	gus of Section 607.0505, Flor	ida Statutes.	on a board of directors. Thereby accept the ap	opojimment as registered
SIGNATURE TO WOOD	*	AMADA CANT	ERA LOPEZ - PRES. DATE DATE	
Signature, Myod or pointed name of region to lage of		Registered Agent signature require 13.	ADDITIONS/CHANGES TO OFFICERS AN	UD DIDECTORS IN 12
TITLE	DELETE	1.1 TITLE		
NAME MARTIN, RAUL		1.2 NAME	100002517 -05/11/38	01005007
STREET ADDRESS 1180 E. FIRST. AVENUE		1.3 STREET ADDRESS	****150.00	****150.00
CITY-ST-ZIP HIALEAH FL		1.4 CITY-ST-ZIP		100,00
TITLE 8	DELETE	2.1 TITLE		Change Addition
NAME GALGUERA, ERNESTO		2.2 NAME		
STREET ADDRESS 220 HIALEAH DRIVE		2.3 STREET ADDRESS		
CITY-ST-ZIP HIALAEH FL	- Dei ett	2. 4 CITY - ST - ZIP		
TITLE PD NAME GALGUERA, ERNESTO	☐ DELETE	3.1 THTLE		Change Addition
400 1441 E411 DDUE		3.2 NAME		
13141 PALLEY		3.3 STREET ADDRESS		
CITYPST-ZIP HIALEAN FL	DELETE	3.4 CITY-ST-ZIP 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	Λ	
STREET ADDRESS		5.3 STREET ADDRESS	۸ ۱۱	
C/TY-ST-ZIP	- · · · · · · · · · · · · · · · · · · ·	54 CITY-ST-ZIP	N 5 11	
TITLE	☐ DELETE	61 THLE	201	Change Addition
NAME		6.2 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP 14. I hereby certify that the information supplied with	1	6.4 CITY-ST-ZIP	Section 119 07(3)(i) Florida Statutes I further	

ining does not quality for the exemption stated in Section 119.07(3)(1), Florida Statutes, I further certify that the information report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in with an address indicated on this annual report or supplet officer or director of the corporation or the Block 12 or Block 13 if changed, or on in