

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 465720

1. Entity Name
LA CANASTILLA CUBANA DISTRIBUTING CORP.



Principal Place of Business

2300 CORAL WAY
SUITE 200
MIAMI, FL 33145

Mailing Address

2300 CORAL WAY
SUITE 200
MIAMI, FL 33145

04 APR 26 AM 11:13

TALLAHASSEE, FLORIDA



03262004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1565398

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FLORIDA ANNUAL REPORT SERVICES INC
2300 CORAL WAY
SUITE 200
MIAMI, FL 33145

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

AMANDA CANTEIRA LOPEZ

4/20/04

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MARTIN, RAUL 1180 E. FIRST AVENUE HIALEAH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS MARTIN, ESTHER 1300 W 49TH STREET HIALEAH, FL 33012
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GALGUERA, ERNESTO 220 HIALEAH DRIVE HIALEAH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MARTIN, ARMANDO 1300 W 49TH STREET HIALEAH, FL 33012
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

900035551839
05/06/04--01007--015 **150.00

4/20/04

**DO NOT WRITE
IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/20/04

ERNESTO GALGUERA