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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90066 013 ***150.00

 Corporation 			•				
CABANA	S HOTEL, CORP.				I IGRIG FILE HAN GRIE ORIGE IGNI BAN BAN BEN	Alan aian alah a	1811 SIBN (1881
Principal Place	e of Business	Mailing Address			7 INBIIN PINID EIRIN ADITE ENINE INIU NOU ALUEI	EIRII GIBII BIBII GI	IDII BIBII IBDI
86 W 25TH ST 86 W 25TH ST							
HIALEAH FL 33010 HIALEAH FL 33010					DO NOT WRITE IN THIS	C CDACE	
					3. Date Incorporated or Qualifed	3 SPACE	
					04/11/1979		
2. Principal Pl	lace of Business	2a, Mailing Address			4. FEI Number	Apr	olied For
21		26			59-1924375		Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A	
22		27			J. Contracto di Contracto	Fee Rec	
City & State	е	City & State			. 6. Election Campaign Financing	\$5.00	
23	Country	28	Count		Trust Fund Contribution	Added to	rees
Zip	Country 25	Zip	30	у	 This corporation owes the current year Ir Personal Property Tax. 		□No
24	9. Name and Address of Current	.,\	30]		10. Name and Address of New Registered		
			8	1 Name			
RODRIGUEZ, YBRAHIN				2 Street Ad	tdress (P.O. Box Number is Not Acceptable)		
' 86 W 25 ST			ľ	2 Olloci Ad	arioss (1 . o. Box Hallison is the tribes place)		
. HIAL	EAH FL 33010		8	3			
t			8	4 City	<u> </u>	85 Zip C	ode
				-	FI	<u>- </u>	
11. Pursuant office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508, Florida Statute f Florida. Such change was au	es, the abo ethorized b	ve-named co y the corpora	prporation submits this statement for the purpose of ation's board of directors. I hereby accept the appo	r changing its i intment as reg	registerea jistered
agent. I a	m familiar with, and accept the obligation	ons of, Section 607.0505, Flori	ida Statute	S.			
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE:	Registered An	ent signature requ	uired when reinstating) DATE		
12.	OFFICERS AND	<u>,, ,, , , , , , , , , , , , , , , , , </u>	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12
TITLE	1,5		1.1 TITLE			☐ Change	☐ Addition
NAME	rodriguez, ybrahin		1.2 NAME				
STREET ADDRESS	86 W 25TH ST		1,3 STRE	ET ADDRESS			
CITY-ST-ZIP			1.4 CITY	ST-ZIP			
TITLE			2.1 TITLE			☐ Change	Addition
NAME	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		2.2 NAME				}
STREET ADDRESS	86 W 25TH ST			ET ADORESS			_
CITY-ST-ZIP			2.4 CITY 3.1 TITLE			Change	Addition
TITLE		DECETE	3.1 NILE			onango	
NAME							
STREET ADDRESS CITY-ST-ZIP			3.4. CITY	ET ADDRESS			
TITLE		☐ DELETE	4.1 TITLE			Change	☐ Addition
NAME			4. 2 NAM	E			
STREET ADORESS			4.3 STRE	ET ADDRESS			
CITY-ST-ZIP			4.4 CITY	ST-ZIP			
TITLE			5.1 TITLE			☐ Change	☐ Addition
NAME			5.2 NAME				
STREET ADDRESS	•			ET ADDRESS			
CITY-ST-ZIP			5.4 CITY		4104 4707	Change	☐ Addition
TITLE			6.1 TITLE			Change	☐ Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STRE	ET ADDRESS			-

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, with all other like empowered.