

FILE NOW: FILING FEE IS \$61.25

FILED

May 30 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 724625 (9)

1. Corporation Name

EL VEDADO, INC.

Principal Place of Business

Mailing Address

237 S.W. 13TH ST
APT. 100
MIAMI FL 33130237 S.W. 13TH ST
APT. 100
MIAMI FL 33130-42423. Date Incorporated or Qualified
10/24/19723a. Date of Last Report
05/20/19962. Principal Place of Business
21 SAME2a. Mailing Address
26 7154-B S.W. 47 STREET4. FEI Number
59-1595799Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

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

City & State

27 City & State
28 MIAMI, FLORIDA6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

Zip

Country

29 Zip
33155-4654Country
30 DADE8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SPIEGELMAN, MAX ESQ.
19 WEST FLAGLER STREET
SUITE 420, BISC. BLDG.
MIAMI FL 3313081 Name
GROUP CADICORP, INC.
82 Street Address (P.O. Box Number is Not Acceptable)
7154-B SOUTH WEST 47TH STREET
83
84 City
MIAMI
FL 85 33130

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

5.19.97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PD
GONZALEZ, OSCAR
237 S.W. 13TH STREET, APT. 100
MIAMI FL 33130 ☒ DELETE1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TD
ROMA, EDUARDO
237 S.W. 13TH STREET, APT. 100
MIAMI FL 33130 ☐ DELETE2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
VICE-PRESIDENT / D.
EDUARDO ROMA
237 S.W. 13 STREET # 308
MIAMI, FLORIDA 33130 ☒ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
SD
JAMLTIS, V.
237 S.W. 13TH STREET, APT. 100
MIAMI FL 33130 ☐ DELETE3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
PRESIDENT / D.
VINCENT JAMITIS
237 S.W. 13 STREET # 409
MIAMI, FLORIDA 33130 ☒ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ DELETE4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
SECRETARY / D.
LUCILA RODRIGUEZ
237 S.W. 13TH STREET # 107
MIAMI, FLORIDA 33130 ☐ Change ☒ AdditionTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ DELETE5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
TREASURER / D.
SOCORRO CARMONA
237 S.W. 13TH STREET # 408
MIAMI, FLORIDA 33130 ☐ Change ☒ AdditionTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ DELETE6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP
☐ Change ☐ Addition

14. I do 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 617, Florida Statutes; and that my name appears on Block 12 or Block 13 if changed, or on an attachment with an address.

305-688-4800

SIGNATURE: X *V. J. Jamitis* REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5.19.97

Date

Daytime Phone # 305-688-4800

CR2E037 (9/96)