

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F94620

1. Corporation Name

TWO BROTHERS CAFETERIA INC.

Principal Place of Business

7050 SW 8th Street
Miami, FL 33144

Mailing Address

7050 SW 8th Street
Miami, FL 33144

3. Date Incorporated or Qualified
08/16/1982

3a. Date of Last Report
04-26-95

2. Principal Place of Business
21 651 SW 71 Ct.

2a. Mailing Address
26 651 SW 71 Ct.

4. FEI Number
59-2212952

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

23 City & State
Miami, Florida

28 City & State
Miami, Florida

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

24 Zip
33144

25 Country

29 Zip
33144

30 Country

8. 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

CARIDAD BLANCO
132Q SW 72nd. court
Miami, FL 33144

81 Name
BLANCO, CARIDAD
82 Street Address (P.O. Box Number is Not Acceptable)
651 SW 71 Court
83
84 City
Miami FL 85 Zip Code
33144

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

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

Caridad Blanco

(NOTE: Registered Agent signature required when reinstating)

06-17-96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P/D	<input type="checkbox"/> DELETE
NAME	BLANCO, CARIDAD	
STREET ADDRESS	1320 SW 72nd. Ct.	
CITY-ST-ZIP	Miami, FL 33144	
TITLE	S/T	<input type="checkbox"/> DELETE
NAME	BLANCO, ENRIQUETA	
STREET ADDRESS	1320 SW 72nd. Court	
CITY-ST-ZIP	Miami, FL 33144	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	P/D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	BLANCO, CARIDAD	
1.3 STREET ADDRESS	651 SW 71 Court	
1.4 CITY-ST-ZIP	Miami, FL 33144	
2.1 TITLE	S/T	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	BLANCO, ENRIQUETA	
2.3 STREET ADDRESS	651 SW 71 Court	
2.4 CITY-ST-ZIP	Miami, FL 33144	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	700001882517	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	-07/03/96--01024--006	
5.3 STREET ADDRESS	***225.00	
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CARIDAD BLANCO

06/17/96

(305) 227-2120

Date

Daytime Phone #

CR2E034 (12/95)