

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

DOCUMENT # K34910

1. Corporation Name  
LA SANDWICHES, INC.

Principal Place of Business  
229 14TH STREET  
MIAMI BCH. FL 33139

Mailing Address  
229 14TH STREET  
MIAMI BCH. FL 33139

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

8. Name and Address of Current Registered Agent

BARKET, TIMOTHY K.  
2935 SW 3 AVE.  
6262 SUNSET DR.  
MIAMI FL 33129

81 Name Olivier Farrat  
82 Street Address (P.O. Box Number is Not Acceptable) 229-14th. Street  
83  
84 City Miami Beach FL 85 33139

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

(NOTE: Registered Agent signature required when corporation is changing its registered office or registered agent)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DP	[ ] DELETE
NAME	SYMPHORIEN, GILLES B.	
STREET ADDRESS	229-14TH ST	
CITY-ST-ZIP	MIAMI BEACH FL	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	DP	[X] Change [ ] Addition
12 NAME	Olivier Farrat	
13 STREET ADDRESS	229-14th. Street	
14 CITY-ST-ZIP	Miami Beach, Florida 33139	
21 TITLE		[ ] Change [ ] Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		
31 TITLE		[ ] Change [ ] Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE		[ ] Change [ ] Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		[ ] Change [ ] Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		[ ] Change [ ] Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

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-04/06/93-01086-024  
\*\*\*150.00 \*\*\*150.00

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILE

DATE: FILED

FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	09/28/1988
4. FEI Number	65-0074095
5. Certificate of Status Desired	[ ] Applied For [ ] Not Applicable
6. Election Campaign Financing Trust Fund Contribution	[ ] \$8.75 Additional Fee Required [ ] \$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax	[X] Yes [ ] No
10. Name and Address of New Registered Agent	

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CR2E034 (11/98)