


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 22, 2004 08:00 AM
Secretary of State

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| DOCUMENT # K75881 1. Entity Name ESCOBAR'S GULF, INC. |  |
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| Principal Place of Business 2000 SW 3RD AVE MIAMI, FL 33129 US | Mailing Address 401 SW 8TH MIAMI, FL 33130 US |
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01102004 No Chg-P CR2E034 (10/03)

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| 4. FEI Number 65-0107003 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent ESCOBAR, MANUEL A. 12465 SW 33 ST MIAMI, FL 33175 | DO NOT WRITE IN THIS SPACE |
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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.

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| SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)</small> | DATE _____ |
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| FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | |
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| TITLE NAME STREET ADDRESS CITY - ST - ZIP | DP ESCOBAR, MANUEL A. 12465 SW 33 ST MIAMI, FL |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | DV ESCOBAR, MANUEL JR 12465 SW 33 ST MIAMI, FL |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | DV ESCOBAR, EDUARDO 11837 SW 93 TERR MIAMI, FL |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | DT DIAZ, MARTA 11756 SW 98 TERR MIAMI, FL |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | DS ESCOBAR, MARTA 12465 SW 33 ST MIAMI, FL |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |

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03/22/04-80050-025 150.00

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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.

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| SIGNATURE: <i>Marta Escobar Secretary</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | Date: 3/17/04 | Daytime Phone #: 305-854-2036 |
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