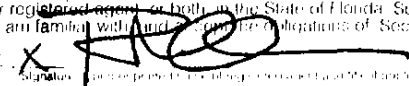
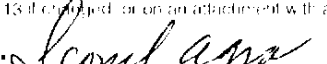


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 26 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # L28774 1. Corporation Name Latin Deli, Inc.			
Principal Place of Business 1900 Sunset Harbour Dr. APT: 1608 Miami Beach, FL 33139 U.S.		Mailing Address 2899 Collins Ave PH-A Miami Beach, FL 33140 U.S.	
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business		3. Date Incorporated or Qualified 11-6-89	
21 Suite, Apt. #, etc.		4. FEI Number 65-0209449	
22 City & State		Applied For Not Applicable	
23 Zip		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
24 Country		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
25		7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 ☐ Yes ☐ No	
26		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 ☐ Yes ☐ No	
27		9. Name and Address of Current Registered Agent	
28		10. Name and Address of New Registered Agent	
29		81 Name Ruben Oliva, Esq.	
30		82 Street Address (P.O. Box Number is Not Acceptable) 2550 SW 3rd Ave	
31		83 3rd Floor	
32		84 City Miami	
33		85 Zip Code FL 33129	
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 understand the obligations of Section 607.0505, Florida Statutes.			
SIGNATURE:  DATE: 5-7-98			
12. OFFICERS AND DIRECTORS			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE PD		1.1 TITLE PD	
1.2 NAME Agra, Leonel		1.2 NAME Agra, Leonel	
1.3 STREET ADDRESS 2899 Collins Ave PH-A		1.3 STREET ADDRESS 1900 Sunset Harbour Dr. APT: 1608	
1.4 CITY-ST-ZIP Miami Beach, FL		1.4 CITY-ST-ZIP Miami Beach, FL 33139	
2.1 TITLE DST		2.1 TITLE DST	
2.2 NAME Agra, Connie		2.2 NAME Agra, Connie	
2.3 STREET ADDRESS 2899 Collins Ave PH-A		2.3 STREET ADDRESS 1900 Sunset Harbour Dr APT: 1608	
2.4 CITY-ST-ZIP Miami Beach, FL		2.4 CITY-ST-ZIP Miami Beach, FL 33139	
3.1 TITLE		3.1 TITLE	
3.2 NAME		3.2 NAME	
3.3 STREET ADDRESS		3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP		3.4 CITY-ST-ZIP	
4.1 TITLE		4.1 TITLE	
4.2 NAME		4.2 NAME	
4.3 STREET ADDRESS		4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP		4.4 CITY-ST-ZIP	
5.1 TITLE		5.1 TITLE	
5.2 NAME		5.2 NAME	
5.3 STREET ADDRESS		5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP		5.4 CITY-ST-ZIP	
6.1 TITLE		6.1 TITLE	
6.2 NAME		6.2 NAME	
6.3 STREET ADDRESS		6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP		6.4 CITY-ST-ZIP	
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 supplementary 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:  LEONEL AGRA			
3/15/98 305-6748409			

CR2E034 (10/97)