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 # L82735 1. Corporation Name

CASA ESPANA, INC.

FILED Feb 25, 1999 8:00 am Secretary of State

02-25-1999 90058 049 ***158.75



						<u>-</u>	
Principal Place	e of Business	Mailing Address	Mailing Address				
C/O JOE RODRIGUEZ 6423 COLLINS AVE. APT 701 MIAMI BCH FL 33141		% JOE RODRIGUEZ 6423 COLLINS AVENUE. APT 701 MIAMI BEACH FL 33141			DO NOT WRITE IN THIS SPACE		
US					3. Date Incorporated or Qualifed		
						06/25/1990	i
2. Principal P	ace of Business	2a. Mailing Address					oplied For
21		26				NOT APPLICABLE / VN	ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.					Additional
22		27				Fee R	equired
City & State		City & State			6. Election Campaign Financing \$5.00	May Be	
23		28			Trust Fund Contribution Added	to Fees	
Zip	Country	Zip	_ Countr	γ		8. This corporation owes the current year Intangible	
24			0			Personal Property Tax. Yes	₩No
	9. Name and Address of Current	Registered Agent	8	1	Name	10. Name and Address of New Registered Agent	
DOD	DICHET INC		10	'\	rvarne		(
RODRIGUEZ, JOE 6423 COLLINS AVENUE			82	2	Street Addre	ess (P.O. Box Number is Not Acceptable)	
APT. 701			<u></u>	_			
	MI BEACH FL 33141		83	3			Ì
MIA	WI DEACH FE 33141		84	4	City	FL 85 Zip	Code
11 Pursuant	to the provisions of Sections 607 0502	and 607 1508 Florida Statutes	the abov	ve-r	named corpo	oration submits this statement for the purpose of changing its	registered
office or r	egistered agent, or both, in the State of familiar with, and accept the obligation	f Florida. Such change was aut	horized by	y th	e corporatio	n's board of directors. I hereby accept the appointment as re	egistered
SIGNATURE						t when reinstation) DATE	
42	Signature, typed or printed name of registered agent		13.	ent s	ignature required	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	ORS IN 12
12.		3.1.102,10.1.1.3		1.1 TITLE		☐ Change	☐ Addition
TITLE	D DODDIGUEZ 200		1		}		
NAME	RODRIGUEZ, JOE		1.2 NAME		000000		
STREET ADDRESS	6423 COLLINS AVE, APT701		13 STREI				İ
CITY-ST-ZIP	MIAMI BEACH FL			1.4 CITY-ST-ZIP 2.1 TITLE		Change	☐ Addition
TITLE							
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREI			<u>نے کا دور کی سے دور دور کی جو ان میں ان کی ان کی ان کی ان کی تو ان کی کی تو ان کی کی تو ان کی کی تو ان کی کی </u> میران کی کار کی	
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NAME			3.2 NAME		PD0E00		ļ
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TITLE		☐ DELETE	i i		Ì		☐ vaainon {
NAME			6.2 NAME		PDDECC	•	ļ
STREET ADDRESS			6.3 STREE		i	:	
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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 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 opporation 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 attach method with an address, with all other like empowered.

SIGNATURE: