

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 # M05976

1. Corporation Name

NUEVA TASCA RESTAURANT INC.

Principal Place of Business

RESTAURANT.

Mailing Address

2741 W Flagler ST

Miami fla 33135.

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

10-3-1984

2. Principal Place of Business

21 2741 W Flagler St.

Suite, Apt. #, etc.

2a. Mailing Address

26 1425 S.W. 78 Ave

Suite, Apt. #, etc.

22 City & State  
Miami fla 33135

23 Zip Country

24 Zip Country

27 City & State  
Miami Fla 33144

28 Zip Country

29 Zip Country

4. FEI Number

59-2465443

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax.

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name

ROGER HERNANDEZ.

82 Street Address (P.O. Box Number is Not Acceptable)

83 1425 S.W. 78 Ave Miami Fla 33144

84 City

FL

85 Zip Code

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 taking filing)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

PRESIDENT.

☐ Change ☒ Addition

1.2 NAME

ROGER HERNANDEZ

1425 S.W. 78 AVE. 33144

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

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 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

Date

Daytime Phone

12-10-99 (305) 409-8575

FILED

99 DEC 13 PM 2:20

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2

MIAMI FLA

12-10-99

TO: FLORIDA DEP OF STATE.

I ROGER HERNANDEZ THE NEW PRESIDENT OF NUEVA TASCA RESTAURANT INC.  
SENDED TO YOU A PREVIOUS LETTER WITH MY NEW ADDRESS AND MAYBE YOU DON'T  
RECEIVED BECAUSE I DON'T RECEIVED THE ANNUAL FEE PAYMENT PAPER SO PLEASE UNDERSTAND  
ME AND HELP ME TO FIX THIS MATTER.

NUEVA TASCA RESTAURANT INC.  
DOCUMENT # M05976

THANKS YOU VERY MUCH.

  
\_\_\_\_\_  
ROGER HERNANDEZ.