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Jun 11 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT **1997**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N95000005781 (8)

1. Corporation Name

PABELLON DE LA VICTORIA DE ORLANDO, INC.

Principal Place of Business	Mailing Address
6001 SILVER STAR RD ORLANDO FL 32808	P.O. BOX 691055 ORLANDO FL 32869-1055

3. Date Incorporated or Qualified: **12/06/1995**
3a. Date of Last Report: **04/29/1996**

4. FEI Number: **59-3357046** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

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

9. Name and Address of Current Registered Agent

PEREZ, RUBEN
6820 KARA COURT
ORLANDO FL 32819

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	PEREZ, HECTOR R		1.2 NAME	
STREET ADDRESS	6820 KARA COURT		1.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32819		1.4 CITY-ST-ZIP	
TITLE	DV	☑ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	LOPEZ, EUGENIO		2.2 NAME	
STREET ADDRESS	10620 DEEGRASS LANE		2.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32821		2.4 CITY-ST-ZIP	
TITLE	DS → change to D.V.	☐ DELETE	3.1 TITLE	☑ Change ☐ Addition
NAME	PEREZ, RUBEN		3.2 NAME	D. Vice president
STREET ADDRESS	6820 KARA COURT		3.3 STREET ADDRESS	Ruben Perez
CITY-ST-ZIP	ORLANDO FL 32819		3.4 CITY-ST-ZIP	6820 Kara Ct Orlando, FL 32819
TITLE	DT	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	PEREZ, SAMUEL		4.2 NAME	
STREET ADDRESS	2802 DELCREST COURT		4.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32817		4.4 CITY-ST-ZIP	
TITLE	Wanda Motta	☐ DELETE	5.1 TITLE	☐ Change ☒ Addition
NAME	11900 Hatcher Circle		5.2 NAME	D. Secretary
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP	Orlando, FL 32824		5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

CR2E037 (9/96)

14. I do 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.