FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 21, 2003 8:00 am
Secretary of State
05-02-2003 90116 038 ***150.00

DOCUMENT # P02000055258

1. Entity Name
CAFETERIA LATINA DOS HERMANOS, INC.

DO NOT WRITE IN THIS SPACE

44005628

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2. Principal Place of Business	3. Mailing Address
66 W. 29TH STREET Suite, Apt. #, etc.	66 W. 29TH STREET Suite, Apt. #, etc.
City & State: HIALEAH, FL	City & State: HIALEAH, FL
Zip: 33012 Country: USA	Zip: 33012 Country: USA

4. FEI Number: 32-0023854 ☐ Applied For ☐ Not Applicable

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

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7. Name and Address of Current Registered Agent

Name: JULIO A. HIDALGO

Street Address (P.O. Box Number is Not Acceptable): 66 W 29TH STREET

City: HIALEAH **FL** Zip Code: 33012

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.

SIGNATURE: Hidalgo 4/29/2003
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE	PD
NAME	JULIO A. HIDALGO
STREET ADDRESS	66 W 29TH STREET
CITY-ST-ZIP	HIALEAH, FL 33012
TITLE	VD
NAME	TERESA HIDALGO
STREET ADDRESS	66 W 29TH STREET
CITY-ST-ZIP	HIALEAH, FL 33012
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Hidalgo 4/29/2003
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CAFETERIA LATINA DOS HERMANOS, INC.
66 W 29th St
Hialeah, FL 33012

10096654

1090

63-643/670
BRANCH 88287

Date 04-29-03

Pay to the Order of Florida Department of State $ 150.00

One Hundred and Fifty Dollars —— 00/XXX Dollars

Security Features Details on Back.

FIRST UNION® First Union National Bank
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INSUFFICIENT FUNDS

Hidalgo

For

MP

[redacted]

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Attachment # 44005628
#P02000055258