
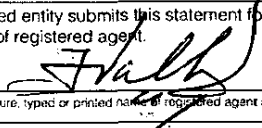



2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90316 007 ***150.00

DOCUMENT # P02000107904			
1. Entity Name LA CARRETA RESTAURANT AT MIRAMAR, INC.			
Principal Place of Business 3663 S.W. 8TH STREET (PENTHOUSE) MIAMI, FL 33135		Mailing Address 3663 S.W. 8TH STREET (PENTHOUSE) MIAMI, FL 33135	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
01162004		Chg-P	CR2E034 (10/03)
4. FEI Number 33-1046377		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
TORRES DE NAVARRA, CARLOS 3663 S.W. 8TH STREET (PENTHOUSE) MIAMI, FL 33135		Name VALLS, FELIPE, JR Street Address (P.O. Box Number is Not Acceptable) 3663 S.W. 8th ST PENTHOUSE MIAMI City FL Zip Code 33135	
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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE: 		DATE	
Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating)	
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	D VALLS, FELIPE A SR. <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VALLS, FELIPE A SR.	NAME	
STREET ADDRESS	3663 S.W. 8TH STREET (PENTHOUSE)	STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FL 33135	CITY-ST-ZIP	
TITLE	D VALLS, FELIPE A JR. <input type="checkbox"/> Delete	TITLE	PRESIDENT/SECRETARY/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VALLS, FELIPE A JR.	NAME	VALLS, FELIPE A, JR
STREET ADDRESS	3663 S.W. 8TH STREET (PENTHOUSE)	STREET ADDRESS	3663 S.W. 8th ST - PENTHOUSE
CITY-ST-ZIP	MIAMI, FL 33135	CITY-ST-ZIP	MIAMI, FL. 33135
TITLE	<input type="checkbox"/> Delete	TITLE	VICE PRESIDENT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	TORRES DE NAVARRA, CARLOS
STREET ADDRESS		STREET ADDRESS	3663 S.W. 8th ST - PENTHOUSE
CITY-ST-ZIP		CITY-ST-ZIP	MIAMI, FL. 33135
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		(FELIPE A. VALLS, JR) 2/20/04 305.446-4916	
Signature, typed or printed name of signing officer or director		Date Daytime Phone #	