

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000111503

FILED
Apr 14, 2004
Secretary of State

Entity Name: DISTRIBUIDORA LA CUISINE, INC.

Current Principal Place of Business:

10 VENETIAN WAY, #1401
MIAMI, FL 331398833

New Principal Place of Business:

Current Mailing Address:

10 VENETIAN WAY, #1401
MIAMI, FL 331398833

New Mailing Address:

FEI Number: 52-2385794

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GAUBEKA, JOSU
10 VENETIAN WAY, #1401
MIAMI, FL 331398833 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: GAUBEKA, JOSU
Address: 10 VENETIAN WAY, #1401
City-St-Zip: MIAMI, FL 331398833

Title: V () Delete
Name: GAUBEKA, DOLORES
Address: 10 VENETIAN WAY, #1401
City-St-Zip: MIAMI, FL 331398833

Title: V (X) Delete
Name: GAUBEKA, JESUS
Address: 10 VENETIAN WAY, #1401
City-St-Zip: MIAMI, FL 331398833

Title: T (X) Delete
Name: GAUBEKA, JEANNETTE
Address: 10 VENETIAN WAY, #1401
City-St-Zip: MIAMI, FL 331398833

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSU GAUBEKA

PS

04/14/2004

Electronic Signature of Signing Officer or Director

Date