

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

Amended

DOCUMENT # P02000121694

1. Entity Name
LA MONTANA RESTAURANTE Y CAFETERIA INC.



05 JUN 28 PM 2:40

Principal Place of Business
10302 W FLAGLER STREET
SWEETWATER, FL 33174

Mailing Address
11481 SW 148 COURT
MIAMI, FL 33196

2. Principal Place of Business

3. Mailing Address

11641 SW 148 CT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

05262005

Chg-P

CR2E034 (10/03)

City & State

City & State
Miami FL

4. FEI Number

13-4221422

Applied For

Not Applicable

Zip

Country

Zip

Country

33193

Miami-Dade

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CANO, MARCELA
11481 SW 148 COURT
MIAMI, FL 33196

7. Name and Address of New Registered Agent

Name
Adriana L. Sierra

Street Address (P.O. Box Number is Not Acceptable)
11641 SW 148 CT

City
Miami

FL

Zip Code

33193

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

Adriana L. Sierra

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

6/27/05

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME CANO, MARCELA
STREET ADDRESS 11481 SW 148 COURT
CITY-ST-ZIP MIAMI, FL 33196

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME Adriana L. Sierra
STREET ADDRESS 11641 SW 148 CT
CITY-ST-ZIP Miami FL 33193

Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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07/12/05--01031--001 **61.25

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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:

Adriana L. Sierra

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

6/27/05