

PO4000132258

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

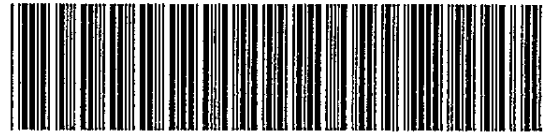
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800045298328

done with notice

07/28/05--01040--018 **35.00

FILED
05 FEB 14 PM 11:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2/14

400789, 00524, 00672

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: HABAN PIZZA RESTAURANT, INC

DOCUMENT NUMBER: P04000132258

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANIBAL R. COBOS

(Name of Person)

HABANA PIZZA RESTAURANT, INC

(Name of Firm/Company)

6744 W FLAGLER STREET

(Address)

MIAMI, FL 33144

(City/State/and Zip Code)

For further information concerning this matter, please call:

ANIBAL R. COBOS

(Name of Person)

at (305) 265-9984

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

MAILING ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

February 2, 2005

Anibal R. Cobos
Habana Pizza Restaurant, Inc.
6744 W. Flagler Street
Miami, FL 33144

SUBJECT: HABANA PIZZA RESTAURANT, INC.
Ref. Number: P04000132258

We have received your document for HABANA PIZZA RESTAURANT, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check one of the boxes in the fourth paragraph.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6907.

Annette Ramsey
Document Specialist

Letter Number: 905A00007517

RECEIVED
05 FEB 14 AM 10:36
DIVISION OF CORPORATIONS

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FILED
05 FEB 14 PM 11:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FIRST: The name of the corporation as currently filed with the Department of State:

HABANA PIZZA RESTAURANT, INC

SECOND: The document number of the corporation (if known): P04000132258

THIRD: The date dissolution was authorized: 1/18/2005

Effective date of dissolution if applicable: IMMEDIATE
(no more than 90 days after dissolution file date)

FOURTH: Adoption of Dissolution (CHECK ONE)

- ☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.
- ☐ Dissolution was approved by of the shareholders through voting groups.

The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

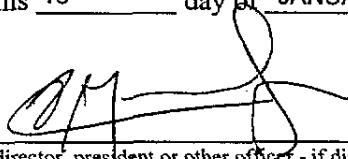
The number of votes cast for dissolution was sufficient for approval by

100.00 %

(voting group)

Signed this 18 day of JANUARY, 2005

Signature: *


(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

ANIBAL R. COBOS

(Typed or printed name of person signing)

DIRECTOR - PRESIDENT

(Title of person signing)

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "*Notice of Corporate Dissolution*" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: HABANA PIZZA RESTAURANT, INC

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the *Articles of Dissolution*.

Description of information that must be included in a claim:

DISSOLUTION FOR LOST

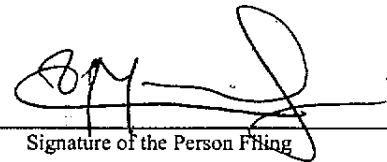
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

15226 SW 21 LN, MIAMI, FL 33185

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

ANIBAL R. COBOS

Printed Name of the Person Filing



Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00