

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000020343

FILED
Feb 08, 2006
Secretary of State**Entity Name:** LAS HAMACAS RESTAURANT, INC.**Current Principal Place of Business:**10325 HAMMOCKS BLVD
MIAMI, FL 33196**New Principal Place of Business:****Current Mailing Address:**10325 HAMMOCKS BLVD
MIAMI, FL 33196**New Mailing Address:****FEI Number:** 20-2337991**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**VELASCO, EUGENIO
16130 SW 111 TER
MIAMI, FL 33196 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

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: TOMASSELLI, HERNAN
Address: 14976 SW 110 TERRACE
City-St-Zip: MIAMI, FL 33196

Title: JRVD (X) Delete
Name: CARDENAS, JOSE
Address: 9121 SW 157TH AVE. RD
City-St-Zip: MIAMI, FL 331961159

Title: SD (X) Delete
Name: FUNDORA, JOSE
Address: 20611 SW 122 COURT
City-St-Zip: MIAMI, FL 33177

Title: MEM (X) Delete
Name: CAMPBELL, IRVING
Address: 10068 SW 156 COURT
City-St-Zip: MIAMI, FL 33196

Title: MEM (X) Delete
Name: MARTINEZ, RAUL
Address: 13700 SW 62ND STREET, APT # 105
City-St-Zip: MIAMI, FL 33183

Title: SRVD (X) Delete
Name: VELASCO, EUGENIO
Address: 16130 SW 111 TERRACE
City-St-Zip: MIAMI, FL 33196

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
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City-St-Zip:

Title: () Change () Addition
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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 Chapter 119, 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: EUGENIO VELASCO

RA

02/08/2006

Electronic Signature of Signing Officer or Director

Date