2006 FOR PROFIT CORPORATION

Apr 25, 2006 8:00 am Secretary of State **ANNUAL REPORT (AR)** 3/, **DOCUMENT # P05000024633** 03-24-2006 90026 004 ***150 00 1. Entity Name LAS PANTERAS SPORT BAR, INC. Principal Place of Business Mailing Address 4400 PETERS ROAD FT. LAUDERDALE FL 33317 4400 PETERS ROAD FT. LAUDERDALE FL 33317 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) 4. FEI Number City & State City & State Applied For Not Applicable Zio Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ARGUETA, EDUARDO 4400 PETERS ROAD Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33317 City Zip Code 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. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition EDUARDO NAME NAME STREET ADDRESS STREET ADDRESS C/TY-ST-7/P CITY-ST-ZIP PRESIDENT Delete TITLE ТОТЕ ☐ Change Addition NAME EDUARDO ARQUETA 4480 NWI 61 ST NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP M. LAUDER DALE 33319 - Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - 212 TITLE ☐ Defete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE Delete ☐ Channe ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-78 CITY-ST-ZIP mr TITLE ☐ Delete ☐ Chance ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-72P 12. I hereby cartify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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/pinth an address, with all other like empowered.

ED VAI CO AGUETA

BY AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR OTHER TOR

SIGNATURE:

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