FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

DIVISION OF CORPORATIONS

1. Corporation	MENT # P930 Name 10 BANQUET HALL, INC.	00067256 (6	6)						ŀ
Principal Place	of Business	Mailing Address		II	UUNUU HU IDISE IIII BRIR KI				İ
7312 W 30 LANE HIALEAH FL 33016 US		7312 WEST 30 LANE HIALEAH FL 33016 US							
Ų0		03			corporated or Qualified /22/1993	3a. Date o			
2. Principal Pla	ice of Business	2a, Mailing Address		4. FEI Nur		<u> </u>	3/17/19	Applied For	_
26		- F1			65-0448908		Not Applicable		.— ∋
Suite, Apt. #	r, etc.	Suite. Apt. #, etc		5. Certifica	ate of Status Desired		*	Additional Required	
City & State		City & State			n Campaign Financing und Contribution			May Be	
Zip 24	Country 25	Z _I p 29	Country 30	I	This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
	g. Name and Address of Curre	nt Registered Agent			and Address of New R	egistered Aç	ent		
			81 Nan	ne					
CLERO			82 Stre	et Address (P.O. Box I	Number is Not Acceptab	le;			\dashv
7312 W 30TH LANE HIALEAH FL 33016			83						_
HIMLEA	IN FL 330 10								
			84 City			FL	85 Zip	Code	
or registere familiar with SIGNATURE	o the provisions of Sections 607.050 ad agent, or both, in the State of Flor h, and accept the obligations of, Sec	ida, Such change was authorization 607,0505, Florida Statutes	ed by the corporation	n's board of directors.	his statement for the pur I hereby accept the appi	pose of chang pintment as re	jing its re gistered	egistered offic agent. I am	e
	Signature, typed or printen hallie of registered age:	tacinto fascileation (NO ND DIRECTORS		re required when renshiring)	2100014110503005	[]4]E	IDEOTO:	DO IN 40	_ £
12. TITLE	PSD	DELETE	13.	ADINTIC	ONS/CHANGES 10 OFF		Change	RS IN 12 Addition	CR2E034 (12/95)
NAME	CLERO, JOSE		1.2 NAME				onang.		4
STREET ADDRESS	7312 W. 30TH LANE		1.3 STREET ADDRES	55					
CITY-ST-ZIP	HIALEAH FL	180 AT 1	1.4 City - \$1 - ZiP						
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NAME			5.2 NAME				e-iango	Li radiid i	
STREET ADDRESS			5.3 STREET ADORES	ss I					
CHTY-SF-ZIP			5.4 CITY - ST - 7IP						
TITLE		☐ DELETE	6 1 TITLE				Change	Addition	
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREET ADDRES	55					
CiTY-ST-ZiP	certify that the information supplied	untly this films to not estable from	64CITY-51-7.P	unable for the expense.	on arabad at Continue 440	Owner for		NO. 1 & 141	_
certify that oath; that I	the information indicated on this and am an officer or director of the corp Block 12 or Block 13 if changes or	iual report or supplemental anni oration or the receiver or trustee	ual report is true and e empowered to exe	accounte and that my	signature shall have the	same legal eff	ect as di	made under	

President

04-24-1996 305-687-6545

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR