

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

APPROVED AND FILED

05 MAY 11 AM 10:39

CORPORATION ANNUAL REPORT 1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northan
Secretary of State
DIVISION OF CORPORATIONS

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000000180 (7)

1. Corporation Name:

CORAL REEF CONTRACTING, INC.

(DO NOT WRITE IN THIS SPACE)

2. Previous Name of Corporation		2a. Mailing Address	
10091 EMERALD WAY DUNNELLON FL 34434		10091 EMERALD WAY DUNNELLON FL 34434	
21. Previous Name of Business	26. Mailing Address	4. FEI Number	Applied For
21	26	59-3214670	Not Applicable
22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
22	27	<input type="checkbox"/>	
23. City & State	28. City & State	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23	28	<input type="checkbox"/>	
24. City	25. State	29. City	30. State

3. Date first organized or Qualified	3a. Date of Last Report
12/23/1993	03/03/1994

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
FOWLER, JOHN H 10091 EMERALD WAY DUNNELLON FL 34434		B1. Name	
		B2. Street Address (P.O. Box Number is Not Acceptable)	
		B3. City	
		B4. State	FL
	B5. Zip Code		

11. Pursuant to the provisions of Sections 817.09(2) and 817.15(8), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office to the address set forth in the State of Florida. Such change was authorized by the corporation's board of directors, thereby accept the appointment as registered agent. I am hereby appointed and accept the appointment of Sections 817.09(2), Florida Statutes.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS CHANGED TO OFFICERS AND DIRECTORS BY:	
1. NAME	PT5 FOWLER, JOHN H 10091 EMERALD WAY DUNNELLON FL	1. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. STREET ADDRESS		2. STREET ADDRESS	
3. CITY & STATE		3. CITY & STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4. NAME		4. NAME	
5. STREET ADDRESS		5. STREET ADDRESS	
6. CITY & STATE		6. CITY & STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
7. NAME		7. NAME	
8. STREET ADDRESS		8. STREET ADDRESS	
9. CITY & STATE		9. CITY & STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
10. NAME		10. NAME	
11. STREET ADDRESS		11. STREET ADDRESS	
12. CITY & STATE		12. CITY & STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13. NAME		13. NAME	
14. STREET ADDRESS		14. STREET ADDRESS	
15. CITY & STATE		15. CITY & STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I, the undersigned, certify that the information supplied with this filing is truthfully furnished and does not qualify for the exemption stated in Section 817.09(2), Florida Statutes. I further certify that this information is filed on the annual report or supplemental annual report as law and is valid 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 registered trustee and am authorized to execute this report as required by Chapter 601, Florida Statutes, and that my name appears in Block 1, of Block 1, of this report or any other attached to this filing.

SIGNATURE: John H. Fowler
SIGNATURE AND TYPED ON PRINTED NAME OF FILING OFFICER OR DIRECTOR

5-8-95
904-843-4444

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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Tallahassee, Florida
32399-0001

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AND
FILED

DOCUMENT # **P94000000542 (8)**

NEW GAUCHO CAFE, INC.

APR 11 1995 8:15

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

1. Principal Office Address 7441 WAYNE AVE. APT. #15J MIAMI BEACH FL 33141		2a. Mailing Address 7441 WAYNE AVE. APT. #15J MIAMI BEACH FL 33141	
21. Secretary Name	26. Secretary Address	22. Secretary Phone	27. Secretary E-mail
23. State	28. State	24. State	29. State
25. State	29. State	30. State	30. State

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation 01/04/1994	3a. Date of Last Report N/A
4. FEI Number 65-0458031	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under 5-1091(2)(2) Florida Statutes. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**QUIROGA, RENE J
7441 WAYNE AVE.
APT. 15J
MIAMI BEACH FL 33141**

10. Name and Address of New Registered Agent

B1. Name	
B2. Street Address (P.O. Box Number is Not Acceptable)	
B3.	
B4. City	
FL B5. Zip Code	

11. Pursuant to the provisions of Sections 607.01 and 607.02, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as a registered agent. I am familiar with the provisions of Sections 607.01 and 607.02, Florida Statutes.

SIGNATURE: REGISTERED AGENT: _____

12. OFFICERS AND DIRECTORS

NAME	D QUIROGA, RENE J
STREET ADDRESS	7441 WAYNE AVE. APT. #15J
CITY	MIAMI BEACH FL 33141
STATE	
NAME	
STREET ADDRESS	
CITY	
STATE	
NAME	
STREET ADDRESS	
CITY	
STATE	
NAME	
STREET ADDRESS	
CITY	
STATE	
NAME	
STREET ADDRESS	
CITY	
STATE	

13. ADDITIONS, CHANGES TO OFFICERS, AND DIRECTORS IN 1/

NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY		
STATE		
NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY		
STATE		
NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY		
STATE		
NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY		
STATE		

14. I, the undersigned, certify that the statements supplied with this filing are voluntarily furnished and known to be fully and correctly stated as true and correct, for the exceptions stated in Section 607.01(2)(b), Florida Statutes. The true and correct statements are attached to this annual report or supplemental annual report as requested by statute and that they conform therewith. The names and positions of all officers and directors of this corporation as of the first day of the reporting period are attached to this report as required by Chapter 607, Florida Statutes, and that my name appears on the list of officers and directors attached therewith.

SIGNATURE: REGISTERED AGENT: _____

05-11-95 (305) 649-9494