FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P94000017726

Corporation Name

LA CARAMBOLA-BILLARES INC.

FILED Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90081 044 ***150.00



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Principal Place	of Business	Mailing Address				,	34			
3012 N GOLDEROD RD 3012 N GOLDEROD RD										
WINTER PARK FL 32792 WINTER PARK FL 32792					DO NOT WRITE IN THIS SPACE					
					3 Date Incorr	orated or Qualifed				\neg
					03/07/19	94				╛
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Numbe			<u> </u>	Applied For	4
21		26 same			59-32268	380			Not Applicable	릐
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional Fee Required				ļ	
22		27								4
City & State	e	City & State				mpaign Financing			May Be	}
23		28	0			Contribution			d to Fees	
Zip	Country	Zip	Country			ation owes the cun roperty Tax.	rent year Inta	angible □Yes	□No	}
24	25	29 30	' 			Address of New I	Registered A			ㅓ
	9. Name and Address of Current	Registered Agent	81	Name /		ROD'2				ᅱ
800	RIGUEZ, LILIANA			1	,-,			て		\dashv
	WALER'S WAY		82	Street Addre	ess (P.O. Box Nur	mber is Not Accept	able)			Ì
	ANDO FL 32822		83	1011		72.0				_
01,12			00	1941	Onmo	oge Dr				
			84	City () Y	ando		FL	85 Zij	p Code X Z	-
	to the provisions of Sections 607,0502		<u> </u>		austice submite thi	a statement for the				\dashv
office or re agent. I as SIGNATURE	egistered agent, or both, in the State on the State of the applications with, and accept the obligations.	of Florida. Such change was authoritions of, Section 607.0505, Florida	orized by Statutes	the corporations.	in's board of direct	ors. I hereby acce	pt the appoin	itment as	registered	
	Signature, typed or printed name of registered agent			ent signature required		/CHANGES TO OF	DATE AN	D DIBEC.	TORS IN 12	\neg
12.	OFFICERS ANI	D DIRECTORS	13. 1.1 TITLE		ADDITIONS	CHANGES TO OF	FICERS AN	Change		on
TITLE	<u> </u>									-
NAME	RODRIQUEZ, LILIANA		1.2 NAME							
STREET ADDRESS	4923 WALER'S WAY ORLANDO FL 32822			T ADDRESS						
CITY-ST-ZIP	VP	☐ DELETE	1.4 CITY-5 2.1 TITLE	ST-ZIP				☐ Change	e [] Additi	on
TITLE	GIRALDO, PHANOR	□ NETELE	2.1 HILE 2.2 NAME							
NAME	5570 SANIBEL ST			-T 4DDDESS					-	- {
STREET ADDRESS	ORLANDO FL 32807		2.3 STREET ADDRESS 2.4 CITY-ST-ZIP							
CITY-ST-ZIP	UNLANDO FL 32007	☐ DELETE	2. 4 CITY-	S1-ZIP				Change	e Additi	on
TITLE		- Deterc								
NAME			3.2 NAME							٠,
STREET ADDRESS				T ADDRESS		•		_		l
CITY-ST-ZIP		□ DErELE	34, CITY- 4.1 TITLE	ST-ZIP				Change	je ∏Additi	on
TITLE		□ perete		.						
NAME			4. 2 NAME							- 1
STREET ADDRESS				ET ADDRESS						
CITY-ST-ZIP		C DELETE	4.4 CITY-5	ST-ZIP				Chang	e ☐ Additi	on
TITLE		☐ DELETE	5.1 TITLE					Criaing	10 T 10000	٠
NAME			5.2 NAME							
STREET ADDRESS			5.3 STREE	ET ADDRESS						

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

☐ DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

Addition