FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT
1996

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

DOCUMENT # P94000023000 (0)

1. Corporation Name

R.U. HUNGRY, INC.

Principal Place of Business	Mailing Address
1300 OCEAN DRIVE 701 BRICKELL AVE., 30TH FLOOR MIAMI BEACH FL 33139 US	6205 BIRD ROAD 701 BRICKELL AVE., 30TH FLOOR MIAMI FL 33131 US

2. Principal Place of Business	2a. Mailing Address
21 1300 OCEAN DRIVE	26 1300 OCEAN DRVE
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 MIAMI BEACH, FLORIDA	City & State 28 MIAMI BEACH, FLORIDA
Zip 24 33139 · Country 25 DADE	Zip 29 33139 · Country 30 DADE

3. Date Incorporated or Qualified: 03/25/1994
3a. Date of Last Report: 05/16/1995
4. FEI Number: 65-0476141 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

HERNANDEZ, LUIS F.
C/O ESTEFAN ENTERPRISES INC.
6205 BIRD ROAD
MIAMI FL 33155

10. Name and Address of New Registered Agent

81 Name: HERNANDEZ, LUIS F.
82 Street Address (P.O. Box Number is Not Acceptable): C/O ESTEFAN ENTERPRISES, INC.
83 555 JEFFERSON AVENUE
84 City: MIAMI BEACH FL 85 Zip Code: 33139

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE Luis F. Hernandez LUIS F. HERNANDEZ COMPTROLLER 4/18/96
Signature, typed or printed name of registered agent and title if applicable — NOTE: Registered Agent signature required when reinstating — DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	~~PSTD~~	☒ DELETE	1 1 TITLE	PSTD ☒ Change ☐ Addition
NAME	~~ESTEFAN, EMILIO JR~~		1 2 NAME	RAUL BELLO
STREET ADDRESS	~~6205 BIRD ROAD~~		1 3 STREET ADDRESS	1300 OCEAN DRIVE
CITY-ST-ZIP	~~MIAMI FL~~		1 4 CITY-ST-ZIP	MIAMI BEACH, FLORIDA 33139
TITLE	~~X~~	☒ DELETE	2 1 TITLE	☐ Change ☐ Addition
NAME	~~FAJARDO, REBECCA~~		2 2 NAME	
STREET ADDRESS	~~6205 BIRD ROAD~~		2 3 STREET ADDRESS	
CITY-ST-ZIP	~~MIAMI FL~~		2 4 CITY-ST-ZIP	
TITLE	~~X~~	☒ DELETE	3 1 TITLE	☐ Change ☐ Addition
NAME	~~HERNANDEZ, LUIS F~~		3 2 NAME	
STREET ADDRESS	~~6205 BIRD ROAD~~		3 3 STREET ADDRESS	
CITY-ST-ZIP	~~MIAMI FL~~		3 4 CITY-ST-ZIP	
TITLE		☐ DELETE	4 1 TITLE	☐ Change ☐ Addition
NAME			4 2 NAME	
STREET ADDRESS			4 3 STREET ADDRESS	
CITY-ST-ZIP			4 4 CITY-ST-ZIP	
TITLE		☐ DELETE	5 1 TITLE	☐ Change ☐ Addition
NAME			5 2 NAME	
STREET ADDRESS			5 3 STREET ADDRESS	
CITY-ST-ZIP			5 4 CITY-ST-ZIP	
TITLE		☐ DELETE	6 1 TITLE	☐ Change ☐ Addition
NAME			6 2 NAME	
STREET ADDRESS			6 3 STREET ADDRESS	
CITY-ST-ZIP			6 4 CITY-ST-ZIP	

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: RAUL D. BELLO PRESIDENT 4/18/96 (305)538-0553
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #