

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000033791 (2)

1. Corporation Name

CASA GABRIEL RESTAURANT & BANQUET HALL, INC.



Principal Place of Business

Mailing Address

~~010 BELEVEDERE RD.~~
WEST PALM BEACH FL 33405

~~010 BELEVEDERE RD.~~
WEST PALM BEACH FL 33405

2. Principal Place of Business

2a. Mailing Address

21 6200 South Dixie Highway 27 6200 So. Dixie Highway

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 West Palm Beach FL 27 West Palm Beach, FLA.

Zip

Country

Zip

Country

24 USA 29 33405 30 U.S.A.

9. Name and Address of Current Registered Agent

ISASI, GABRIEL
~~010 BELEVEDERE ROAD~~
WEST PALM BEACH FL 33405

3. Date Incorporated or Qualified

05/04/1994

3a. Date of Last Report

04/04/1995

4. FEI Number

59-1983385

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

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 6200 South Dixie Highway

84 City

West Palm Beach

FL

85 Zip Code

33405

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

Signature typed or printed name of registered agent and the applicable

(NOTE: Registered Agent's signature required when changing)

6/19/96

12. OFFICERS AND DIRECTORS

TITLE D/P
NAME ISASI, GABRIEL
STREET ADDRESS ~~010 BELEVEDERE RD.~~
CITY - ST - ZIP WEST PALM BEACH FL 33405

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☒ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/19/96 (561) 586-0303

CR2034 (3/96)