FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

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

APPROVED AND FILED

95 APR 27 AM 8:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000067150 (0)**

1. Corporate Name
CASA ALTAMIRANO, INC.

Principal Place of Business
4884 SW 74TH ST
MIAMI FL 33155

Mailing Address
4884 SW 74TH ST
MIAMI FL 33155

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **09/07/1994**
3a. Date of Last Report:

21 2. Principal Place of Business: 4884 SW 74 CT
26 2a. Mailing Address: 4884 SW 74 CT
4. FEI Number: 65-0567831 — Applied For / Not Applicable

22 Suite, Apt. #, etc.
27 Suite, Apt. #, etc.
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

23 City & State: MIAMI, FLORIDA
28 City & State: MIAMI, FLORIDA
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

24 Zip: 33155 — 25 County: USA
29 Zip: 33155 — 30 County: USA
8. The corporation has liability for intangible tax under S. 199.032 Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

GUTIERREZ, RAUL
~~4884 SW 74TH ST~~
MIAMI FL 33155

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 4884 SW 74 CT
83 MIAMI, FLORIDA
84 City: FL — 85 Zip Code: 33155

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 of a Director or Officer of Corporation or Registered Agent (Not Registered Agent Signature Required If Agent Is Changing) — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☒ Change ☐ Addition
NAME	GUTIERREZ, RAUL	12 NAME	
STREET ADDRESS	4884 SW 74TH ST	13 STREET ADDRESS	4884 SW 74 CT
CITY, ST, ZIP	MIAMI FL 33155	14 CITY, ST, ZIP	MIAMI, FL 33155
TITLE		21 TITLE	☐ Change ☐ Addition
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY, ST, ZIP		24 CITY, ST, ZIP	
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY, ST, ZIP		34 CITY, ST, ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY, ST, ZIP		44 CITY, ST, ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY, ST, ZIP		54 CITY, ST, ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY, ST, ZIP		64 CITY, ST, ZIP	

14. I 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)(i), Florida Statutes. I further certify that the information indicated on this 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 hereof, or on an attachment with an asterisk.

SIGNATURE: _____ CHAIRMAN OR VICE CHAIRMAN OR PRESIDENT OR OTHER OFFICER OR DIRECTOR — APRIL 20, 1995 (Date) — (305) 663-1494 (Daytime Phone #)

0104540 CP