PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P94000074324

1. Corporation Name

LA TAPATIA MEXICAN GROCERY INC.

Principal Pla	ce of Business	Mailing A	ddress				HOLEL BURNE BOULD	EBIR BERKERANI	I aa ii a ka aa iiki	I INDA DIOLEGA
1451 S.W. HWY. 17		P.O. BOX	P.O. BOX 1069							
ARCADIA FL 34266 ARCADIA FL 34266		FL 34266		1						
US					<u> </u>		DO NOT WR		SPACE	
						ite incorporate	ed or Qualifed	1		
2. Principal	Place of Business	2a. Mailin	a Address)/05/1994 I Number				astical Fac
21		<u></u> ⊢¬	26			65-0522385				pplied For ot Applicable
Suite, Apt	t. #, etc. — — —		Apt. #, etc							Additional
22		27			5. Ce	rtifcate of Sta	tus Desired			equired
City & Sta	ite	City &	State	-	6. Ele	ection Campai	gn Financing		\$5.00	May Be
23	···	28			Tη	st Fund Cont	ribution			to Fees
Zip	Country	Zip	-	Country	8. Th	is corporation	owes the cur	rent year Int		
24	25	29		30		rsonal Proper			Yes	□No
	9. Name and Address of C	urrent Registered A	Agent	81 Name	10. Na	me and Addi	ress of New	Registered .	Agent	
CAI	NDEJAS, ROBERTO			Name	Gilb	erto	Cen	delas		
	5 SW ROBIN RD.			82 Street	Address (P.O.	Box Number	is Not Accept	table)		
ARC	CADIA FL 34266			83		~~	·			
				03	4678	S.W.	Buck	. POHD	151	۱ د
				84 City	ARCA	DIΔ		FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 607	7.0502 and 607.1508	, Florida Statutes	, the above-named	corporation su	hmits this stat	ement for the	nurnose of	changing its	registered
office or	registered agent, or both, in the S am familiar with and accept the o	State of Florida, Such	n change was aut	horized by the corpo	oration's board	of directors. I	hereby acge	of the appoin	ntment as re	gistered
agent. ra	ann tarrings will a all praceeds the o	MINIMATIONS OF SECTION	1 607.0505. Florid	ia Statutes.						~ I
SIGNATURE	P . 18 1 . 18 . 18 . 18 . 18 . 18 . 18 .	orderas	1 607.0505, Florid	a Statutes.			- ا ر	199		
SIGNATURE	Signature, typed or printed name of registers	a agent and title if applicable	e. (NOTE: R	Ja Statutes. legistered Agent signature r				7 / 99 DATE		
SIGNATURE	Signature, typed or printed name of registere OFFICER	grafias	e. (NOTE: R	egistered Agent signature r	equired when reinsta		1 -	7/99 DATE		
SIGNATURE 12. TILE	Signature, typed or printed name of register OFFICER	a agent and title if applicable	e. (NOTE: R	egistered Agent signature r 13. 1.1 TITLE	equired when reinsta	iting)	- 1 -	7/99 DATE		
SIGNATURE 12. TITLE NAME	Signature, typed or printed name of register OFFICER PST CENDEJAS, GILBERT	or agent and tiport applicable S AND DIRECTORS	e. (NOTE: R	egistered Agent signature r 13. 1.1 TITLE 1.2 NAME	equired when reinsta	iting)	- 1 -	7/99 DATE	D DIRECTO	DRS IN 12
12. TITLE NAME STREET ADDRESS	Signature, typed or printed name of register OFFICER PST CENDEJAS, GILBERT 4678 S.W. BULL POND RD	or agent and tiport applicable S AND DIRECTORS	e. (NOTE: R	egistered Agent signature r 13. 1.1 TITLE	equired when reinsta	iting)	- 1 -	7/99 DATE	D DIRECTO	DRS IN 12
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SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of register OFFICER PST CENDEJAS, GILBERT 4678 S.W. BULL POND RD ARCADIA FL 34266 VPC	or agent and tiport applicable S AND DIRECTORS	e. (NOTE: R	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	equired when reinsta	iting) HTIONS/CHAI	NGES TO OF	7 / 99 DATE FICERS AN	D DIRECTO	DRS IN 12
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6.4 CITY-ST-ZIP

address, with all other like empowered

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 13 if changed, or on an attachment with all other like empowered.

Feb 21, 1999 8:00 am Secretary of State

02-21-1999 90049 014 ***150.00