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Apr 28 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000020301 (4)

1. Corporation Name

PANCHO'S CORPORATION

Principal Place of Business Mailing Address
 3375 N. COUNTRY CLUB DR 3375 N. COUNTRY CLUB DR.
 STE. 703 STE. # 703
 NORTH MIAMI BEACH, FL 33180. N.M. B, FL 33180

3. Date Incorporated or Qualified 03-10-1995 3a. Date of Last Report 05-20-96

2. Principal Place of Business 2a. Mailing Address
 21 3375 N. COUNTRY CLUB DR. 7098 BONITA DRIVE

4. FEI Number 65-0584001 Applied For Not Applicable

22 SUITE # 703 27 Suite, Apt. #, etc.

5. Certificate of Status Desired XX \$8.75 Additional Fee Required

23 N. MIAMI BEACH, FLORIDA 28 MIAMI BEACH, FL

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

24 33180 25 US 29 33141 30 US

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes XX Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TRUENQUE, IRENE
 7098 BONITA DRIVE
 MIAMI BEACH, FL 33141

81 Name CELINA C FERNANDEZ
 82 Street Address (P.O. Box Number is Not Acceptable) 3375 N. COUNTRY CLUB DRIVE
 83 SUITE # 703
 84 City NORTH MIAMI BEACH FL 85 Zip Code 33180

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]* April 22 of 1997 DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	☐ DELETE	1.1 TITLE	DVP ☐ Change ☐ Addition
NAME		1.2 NAME	LARA, RAFAEL B
STREET ADDRESS		1.3 STREET ADDRESS	3375 N. COUNTRY CLUB DR. STE. 703
CITY, ST, ZIP		1.4 CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33180
TITLE	☐ DELETE	2.1 TITLE	DPS ☒ Change ☐ Addition
NAME		2.2 NAME	CELINA FERNANDEZ
STREET ADDRESS		2.3 STREET ADDRESS	3375 N. COUNTRY CLUB DR. STE. 703
CITY, ST, ZIP		2.4 CITY-ST-ZIP	NORTH MIAMI BEACH, FLORIDA 33180
TITLE	☐ DELETE	3.1 TITLE	D ☐ Change ☒ Addition
NAME		3.2 NAME	DIEGO CAPPELLA
STREET ADDRESS		3.3 STREET ADDRESS	3375 N. COUNTRY CLUB DR. STE. 703
CITY, ST, ZIP		3.4 CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33180
TITLE	☐ DELETE	4.1 TITLE	D ☐ Change ☒ Addition
NAME		4.2 NAME	FIORELLA AGOSTINO
STREET ADDRESS		4.3 STREET ADDRESS	439 POINCIANA ISLE DRIVE
CITY, ST, ZIP		4.4 CITY-ST-ZIP	N. MIAMI BEACH, FL 33160
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	200002159062
STREET ADDRESS		6.3 STREET ADDRESS	-04/29/97--01099--062
CITY, ST, ZIP		6.4 CITY-ST-ZIP	***173.75

14. I do 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 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE: *[Signature]* (President) 04-22-97 (305) 936-2414
 SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)