

FILED

May 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT #		P95000022981 (1)	
1. Corporation Name CASA VARELA INC.			
Principal Place of Business 3511 NW 8TH AVE. #11 POMPANO BEACH FL 33064		Mailing Address 3511 NW 8TH AVE. #11 POMPANO BEACH FL 33064	
2. Principal Place of Business 21 307 SW 33rd Ave Suite, Apt. #, etc. 22		2a. Mailing Address 26 307 SW 33rd Ave Suite, Apt. #, etc. 27	
City & State 23 Deerfield Bch, FL Zip 24 33442 Country 25 Broward		City & State 28 Deerfield Bch, FL Zip 29 33442 Country 30 Broward	
9. Name and Address of Current Registered Agent			
VARELA, CLAUDIA 35-11 NW 8TH AVE BAY #11 POMPANO BEACH FL 33064			81 Name 82 Street Address 83 84 City De
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation or registered agent, or both, in the State of Florida, such change was authorized by the corporation or agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE <i>[Signature]</i> (NOTE: Registered Agent signature required)			
12. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VARELA, ALBERTO 35-11 NW 8TH AVE BAY #11 POMPANO BEACH FL 33064	<input type="checkbox"/> DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VARELA, CLAUDIA 35-11 NW 8TH AVE BAY #11 POMPANO BEACH FL 33064	<input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in S indicated on this annual report or supplemental annual report is true and accurate and that my signature officer or director of the corporation or the receiver or trustee empowered to execute this report as required Block 12 or Block 13 if changed, or upon attachment with an address.			
SIGNATURE <i>[Signature]</i>			



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
03/20/1995

4. FEI Number **65-0558824**

Applied For
Not Applicable

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

6. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

10. Name and Address of New Registered Agent

ELA, Claudia
307 SW 33rd Ave
5-1-98

erfield Bch, FL **85** Zip Code **33442**

ation submits this statement for the purpose of changing its registered n's board of directors. I hereby accept the appointment as registered

CB2F034 (10/97)