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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1**9**98

P95000039517 (4) DOCUMENT #

FILED Jul 07 1998 8:00am Secretary of State

CR2E034

T. MAN SERVICE, INC. Principal Place of Business Mailing Address D/B/A CARLITOS CAFE D/B/A CARLITOS CAFE 9558 S.W. 137 AVE. 9558 S.W. 137 AVE. DO NOT WRITE IN THIS SPACE MIAMI FL 33187 MIAMI FL 33187 3. Date Incorporated or Qualified <u>08/11/1995</u> 2. Principal Place of Business 26. Mailing Address Applied For 21 Not Applicable 26 65-0600141 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Zφ Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes ΠNο 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 GRANDE, VICTOR 5992 S.W. 153 STREET 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33157 83 City 85 Zip Code 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of regions and agent and attent applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 OFFICERS AND DIRECTORS 13. 🔽 DELFTE 11 ITLE Change Addition TITLE EDUARDO F. MEDINA 15298 SW 104 St #938 **GRANDE, VICTOR** NAME 1.2 NAME 5992 S.W. 152 STREET STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33157** 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE **GRANDE, KAREN** NAME 22 NAME 5992 S.W. 152 STREET STREET ADDRESS 2 3 STREET ADDRESS **M**AMI FL 33157 CITY-ST-ZYP 2. 4 CITY - ST - ZIP DELETE Change Addition 3.1 TITLE TITLE GRANDE, CHARLES NAME 3.2 NAME 5992 S.W. 152 STREET STREET ADDRESS 3.3 STREET ADDRESS **M**IAMI FL 33157 3.4. CITY- ST-ZIP CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 5.11/016 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change DELETE 61 THLE Addition TITLE **800002582408** -07/08/98--01014--023 NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS ***150.00 CITY-ST-ZIP 6.4 CITY - ST - ZIP

14. Thereby certify that the information supplied with his tiling 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 of supplements 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 changes or on any manner with an address.

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