. FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

1. Corporation Name P95000047351 (8)

HEREFORD GRILL CORP				
Principal Place of Business	Mailing Address		I ORRIJERI SHE GREET BRITT BRITT BRITT	it 84tit bûjit ûtert loodê min birdt jini teat
10700 W ELASCER ST MAKE FL 33174	10700 W FLAGLER ST MANT FL 33174			
			3. Date Incorporated or Qualified 06/15/1995	3a. Date of Last Report
Principal Place of Business The Principal Place of Business	2a. Mailing Address 26		4. FEI Number 65-0198647	Applied For Not Applicable
Suite, Apt. #, etc. 22 782 NW. 42 Ave.	# 5 27 782 NW K2	AUE #5	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State 23 MIMMI. FL	City & State 28 MI FMI, Ft		Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees
Zip Country 25 25	29 77/26 30	Country	8. This corporation has liability for Florida Statutes	s 🔲 No
9. Name and Address	of Current Registered Agent	81 Name	10. Name and Address of New I	Registered Agent
MORENO, IGNACIO- 10700 W FLAGLER ST <™IAMI FL 33174		82 Street Add: /5 = 83	OSE M430 DE Z ress (P.O. Box Number is Not Accepta >85 SW 76 M	FL 85 Zip Code 33 193
or registered agent, or both, in the Str familiar with, and accept the obligation SIGNATURE		y the corporation's boa	rd of directors. I hereby accept the app	roose of changing its registered office
	ICERS AND DIRECTORS	13.		
TITLE	DELETE	1 1 TITLE X	THENDEN	Li onsige La ridation
NAME		1.3 STREET ADDRESS	PREVIDENT TUAN RODRIBUET DIF AN PRIME ALD	4 F. MIRMON
STREET ADDRESS		14 CATY - ST - ZIP	ARIEM VENETURE	A
CITY-SI-ZIP TITLE	☐ DELETE		- PREVIDENT	Change Addition
NAME	C		TOUR MARIO DE BARRO	
STREET ADDRESS		2.3 STHEET ADDRESS /	5785 SW 76 TEXX	#108
CITY-ST-ZIP		24 CITY-ST-ZIP	MIMMI, IL ASKI	<i>¥</i>

4.8 5 4 CHY-SI-71F CITY-ST-ZIP Change ☐ Addition DELETE 6 1 THREE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY-ST-ZIP

3 1 TIT. F

3.2 NAME

4 1 IIILE

4.2 NAME

5.10000

5.2 NAME

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

4.4 CITY - ST - ZIP

3 4 CITY - ST - ZIP

SECREMRY

MANUEL

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CORN Grows FE 37 184

***200.00

14. I do hereby certify that the information supplied with this fing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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

STREET ADDRESS

CITY-ST-ZIP

CITY-S1-ZIP

STREET ADDRESS

TITLE

NAME

TITLE

NAME STREET ADDRESS

TITLE

NAME

TITLE

Vice MUNDEN TEO NAME OB SIGNING OFFICER OR DIRECTOR

DELETE

DELETÉ

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<u>0000001773120</u> -04/09/96--01016--0更Change

Change

☐ Change

Addition

☐ Addition

Addition

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