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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000047351

1. Corporation Name

HEREFORD GRILL CORP

Principal Place of Business	Maili
782 NW 42 AVE #5ST	782 N
MIAMI FL 33126	MIAM

Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90093 044 ***150.00



Principal Place of Business Mailing Address			F 10041004 110 10104 01111 60				06 11 0 1 1001				
782 NW 42 AVE #5ST MIAMI FL 33126		782 NW 42 AVE # MIAMI FL 33126	782 NW 42 AVE #5ST MIAMI FL 33126			DO NOT WRITE IN THIS SPACE					
						3.	Date Incorporated or Qual 06/15/1995	fed			·
2. Principal Pl	ace of Business	2a. Mailing Addres	SS				FEI Number			, P. I	ed For
21		26					65-0598641				pplicable
Suite, Apt.	#, etc.	Suite, Apt. #, 6	etc.			5.	Certificate of Status Desire	d □	\$8.7 Fee	5 Add Requi	
City & State	9	City & State				6.	Election Campaign Finance Trust Fund Contribution	ing -		00 Ma	
Zip	Country	Zip 29	30	untry		8.	This corporation owes the Personal Property Tax.	current year Inta	angible AYes		No
24	9. Name and Address of C		30			10	Name and Address of No	w Registered	<u>~\</u>		
	9. Name and Address of C	difetit Kegistered Agent	-	81	Name			<u> </u>			
	E MARIO DE BARROJ			82			O. Box Number is Not Acc	eptable)	3.2		
		10 S	WIZST								
(VIII) (I	AI-PL-901ZU			83							
				84	City)/		,	FL			144
office or r	to the provisions of Sections 60 egistered agent, or both, in the m familiar with, and accept the	State of Florida. Such change	e was authorize	ed by	the corpora	rporation ition's bo	n submits this statement for eard of directors. I hereby a	the purpose of ccept the appoi	changing ntment as	its reg s regist	gistered tered
SIGNATURE	Signature, typed or printed name of register	ed agent and title if applicable.	(NOTE Registers	d Agen	t signature requ	red when re	einstating)	DATE			
12.		S AND DIRECTORS	13	,		- /	ADDITIONS/CHANGES TO	OFFICERS AN	D DIREC	TORS	S IN 12
TITLE	P	☐ DE	LETE 1.1	TITLE			•		☐ Chan	ge	☐ Addition
NAME	RODRIUEZ, JUAN		1.2	NAME							
STREET ADDRESS	THE ALL THE STATE AND A CONTRACT OF		STREET	ADDRESS				•			
CITY-ST-ZIP	CARACAS, VENEZSULA E	RAŽIL	144	CITY-ST	- ZIP						
TITLE	VPD	☐ DE	LETE 2.1	TITLE					Chan	ge	Addition
NAME	DE BARROS, JOSE MARK	כ	2.2	NAME		_			`		
STREET ADDRESS	651-N.W. 82-AVE #116		2.3	STREET	ADDRESS	789	MI FE	•	_		
CITY-ST-ZIP	MIAMI FL 33126		2.4	спу-в	T- ZIP	MI	mi Fi	2914	<i>y</i>		
TITLE		□ DE	LETE 3.1	TITLE					Chan	ge	☐ Addition

62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 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 corperation 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 chapted, or on applicatement with an address, with all other like empowered.

3.2 NAME

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

☐ DELETE

☐ DELETE

□ DELETE

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

54 CITY-ST-ZIP

4.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

TITLE

NAME

TITLE

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Change

Change

Change

Addition

Addition

Addition