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May 06 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000052453 (4)

1. Corporation Name
OH LA LA TOO, INC.



Principal Place of Business
7400 NW SOUTH RIVER DRIVE
MIAMI FL 33166

Mailing Address
7400 NW SOUTH RIVER DRIVE
MIAMI FL 33166-2506

3. Date Incorporated or Qualified
07/03/1995

3a. Date of Last Report
05/21/1996

2. Principal Place of Business

21 801 West 49 Street

Suite, Apt. #, etc.

22 # 102

City & State

23 Hialeah, FL

Zip

24 33012

Country

25 USA

2a. Mailing Address

26 801 West 49 Street

Suite, Apt. #, etc.

27 # 102

City & State

28 Hialeah, FL

Zip

29 33012

Country

30 USA

4. FEI Number

65-0598130

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

KROCKEL, CARLOS
7400 NW SOUTH RIVER DRIVE
MIAMI FL 33166

10. Name and Address of New Registered Agent

81 Name

Krockel, Carlos

82 Street Address (P.O. Box Number is Not Acceptable)

801 West 49 Street, #102

83

84 City

Hialeah

FL

85 Zip Code

33012

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 of person or persons of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Carlos Krockel, President

4-28-97

12. OFFICERS AND DIRECTORS

TITLE PSD ☐ DELETE

NAME KROCKEL, CARLOS
STREET ADDRESS 7400 NW SOUTH RIVER DRIVE
CITY-ST-ZIP MIAMI FL 33166

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 REQUIRED Carlos Krockel, President 4/28/97 (305) 556-0706

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)