PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STAJE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

04-27-1999 90142 009

DOCUMENT#

1. Corporation Name

P95000069089 (7)

FILED	
Apr 27, 1999 8:00 am	1
Secretary of State	_
04 27 1000 001 42 000 ***150 00	

	GRAND HAVANA RUM	INC.								
Principal Plac	e of Business	Mailing Address		_						
1470 Cecilia Ave 1470 Ceci Coral Gables, Fl Coral Gab							DO NOT WR	ITE IN THIS	SPACE	
33146 33146				,	FI	3. Date Incorporated or Qualifed				
							/1995			
<u> </u>	lace of Business	2a. Mailing Address				4. FEI Num	ber			Applied For
Suite, Apt.	# ato	26 Suite, Apt. #, etc.				 65-06	25003			Not Applicable
22 Suite, Apr.	#, E tc.	27 Suite, Apr. #, etc.				5. Certifcate	of Status Desired			Additional Required
City & Sta	е	City & State				6. Election	Campaign Financing			0 May Be
23		28					nd Contribution			to Fees
Zip	Country Country	Zip	Count	ountry 8. This corporation owes the current year				rent year In	angible	
24	25		30			'	Property Tax.		Yes	□No
	9. Name and Address of Current	Registered Agent				10. Name ar	d Address of New	Registered	Agent	
			8	31	Name					
	Riçardo Arregui		8	32	Street Addre	ss (P.O. Box N	umber is Not Accept	able)		
	14 7 0 \Cecilia Ave	nue	-	33						
	Coral Gables, Rl	33146		,,						
		`\	8	34	City			FL	85 Zip	Cace
11. Pursuant	to the provisions of Sections 607.0502	and 807.1508. Florida Statutes	s, the abo	 ove-r	named cort o	ration submits	this statement for the	purpose of	changing it	s recistered
office or u	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar of the and alcoral the objection	Florida, Such change was aut	thorized b	y th	e corporation	n's board of dir	ectors, I hereby acce	pt the appo	ntment as r	egistered
	Man along the policy									
SIGNATURE	Signature, typed a proved tashe of registered agent a	n i title if applicable. Ricar	registered Ag	ent si	Grade leduire d	when reinstating)	4./_2	1/99 DATE		
12.	OFFICERS AND	DIRECTORS	13.			ADDITION	IS/CHANGES TO OF	FICERS A	ID DIRECT	ORS IN 12
TITLE	P	☐ DELETE	1.1 TITLE	=					☐ Change	Addition
NAME	Arregui, Ricardo		1.2 NAME	E						
STREET ADDRESS	1470 Cecilia Ave		1.3 STRE	ETAL	DORESS					
CITY-ST-ZIP	Coral Gables, Fl	-33146	14 CITY-		ZIP					
TITLE	S S	22 \ 10 DEFEIF	2.1 TITLE						Change	Addition
NAME	Arregui,Olga		2.2 NAME							
STREET ADDRESS	1470 Cecilia Ave		2.3 STRE							
CITY-ST-ZIP	Coral Gables, Fl	3.3.1.46 □ DELETE	2 4 CITY 3 1 TITLE		ZIP				Change	Addition
NAME	т	30000	32 NAME		1				C 4	
STREET ADDRESS	Arregui,Richard		33 STRE		ODRESS					
CITY-ST-ZIP	1470 Cecilia Ave		34. CITY							
TITLE	Coral Gables, Fl	3.3146 □ DELETE	4 1 TITLE						Change	Addition
NAME			4. 2 NAMI	E						
STREET ADDRESS			4.3 STRE	ET AD	DORESS					
CITY-ST-ZIP	<u> </u>		4.4 CITY-	-ST-ZI	IP .					
TITLE		☐ DELETE	5.1 TITLE						☐ Change	Addition
NAME			5.2 NAME	Ē						
STREET ADDRESS			5.3 STRE							
CITY-ST-ZIP			5.4 CITY-		IP					
TITLE		☐ DELETE	6.1 TITLE						Change	☐ Addition
NAME	\wedge		62 NAME							
STREET ADDRESS		<u> </u>	6.3 STREI		i					
CITY-ST-ZIP		\	6.4 CITY-	ST-ZI	IP					

14. I hereby pertify that the information supplied with this iNing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further ce tify that the information indicated on this annual report or supplierental ar nual 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 receive or trustee empowered to execute this report as required by Chapter 307. Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 307, an attache ent with an address, with all other like empowered.

SIGNATURE:

Richard Arregui OF SIGNING OFFICER OR DIRECTOR

Trea.

4/21/99 Date

(305)448-5317

Laytime Phone #

CR2E034 (11/98)