FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P95000087369 (1)

| Principal Place of Business | Mailing Address | | |
|-----------------------------|------------------|--|--|
| 6355 SW 8 ST. | 1757 W. 62ND ST. | | |
| MIAMI FL 33144 | HAILEAH FL 33012 | | |

FILED May 08 1998 8:00am Secretary of State

| LACA | SA GRANDE RESTAURANT, I | NU, | | | | |
|-----------------------------|---|--|--|---|---|--|
| Principal Piac | e of Business | Mailing Address | | | I FOILL LOSSO MARD SHIFT LOLL FOOL | |
| 6355 SW 8 | | 1757 W. 62ND ST. | | | | |
| MIAMI FL 33 | = ' | HAILEAH FL 33012 | | DO NOT WRITE IN TH | II Č ČDA OC | |
| | | | | 3. Date Incorporated or Qualified | IIS SPACE | |
| | | | | 11/13/1995 | | |
| 2. Principal P | lace of Business | 2a. Mailing Address | | 4 FELNumber | Applied For | |
| 21 | | 26 4355 | SW 851 | 65-0631763 | Not Applicable | |
| Suite, Apt | #, etc. | Suite, Apt. #, etc. | <u> </u> | | \$8.75 Additional | |
| 22 | | 27 | | 5. Certificate of Status Desired | Fee Required | |
| City & Stat | 0 | City & State | | 6. Election Campaign Financing | \$5.00 May Be | |
| 23 | | 28 Miami | FLORIDA | Trust Fund Contribution | Added to Fees | |
| Zip | Country | Zip() / | Country | 8. This corporation owes or has paid the | current year Intangible | |
| 24 | 25 | | 30 | Personal Property Tax due June 30. | Yes No | |
| | 9. Name and Address of Current F | Registered Agent | | 10. Name and Address of New Register | ed Agent | |
| | ILIA, ROBERT J | | 81 Name | Ribort Julia | | |
| 1757 W. 62ND ST. 82 | | | 82 Street Ad | t Address (P.Q. Box Number is Not Acceptable) | | |
| HIALEAH FL 33012 | | | | 4211 West 7 | ME | |
| | | | 83 | | | |
| | | | 84 City | */// | . 85 Zip Code | |
| | | | | Mialeah F | L 85 Zip Code 33 いし | |
| 11. Pursuant office or r | to the provisions of Sections 607.0502 a r egistered agent, or both, in the State of | and 607.1508, Florida Statute Florida. Sucl⊯change was al | s, the above-named o uthorized by the corpo | orporation submits this statement for the purpos ration's board of directors. I hereby accept the a | e of changing its registered appointment as registered | |
| agent. I a | m familiar with, and accept the obligate | ins of Section 607/0508, 110 | da Statutes | -1/ | , | |
| SIGNATURE | | Total hall | · · · · · · · · · · · · · · · · · · · | 5/1/98 | | |
| 40 | Signature: typed or protect name of registered agreet a OFFICERS AND I | | flagistered Agent signature re | ADDITIONS/CHANGES TO OFFICERS A | | |
| 12. | Granding AND | DELETE | | | Change Addition | |
| NAME | JULIA, ROBERT | | 1.2 NAME | MEIDENT | Amb ourself | |
| STREET ADDRESS | 1757 W. 62 ST. | | 1.3 STREET ADDRESS | | j | |
| | HIALEAH FL | | 1.4 CITY-ST-ZIP | | | |
| CITY-ST-ZIP | VP | DELETE | 2.1 TITLE | | Change Addition | |
| NAME | ESTEVE, HUMBERTO | | 2.2 NAME | | | |
| STREET ADDRESS | 901 PONCE DE LEON BLVD ST | TF. 304 | 2.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | CORAL GABLES FL 33134 | L1 00 T | 2. 4 CITY - ST - ZIP | | | |
| TITLE | 8 | DELETE | 3.1 TITLE | · · · · · · · · · · · · · · · · · · · | Change Addition | |
| NAME | IGLESIAS, ZELMA | | 3.2 NAME | | | |
| STREET ADDRESS | 2457 COLLINS AVE APT. 1504 | | 3.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | MIAMI BEACH FL | | 3.4. CITY-ST-ZIP | | | |
| TITLE | P | DELETE | 4.1 TITLE | THEASUNER | Change Addition | |
| NAME | VILORINO, MANUEL | | 4. 2 NAME | 1-0-1-20100-0 | | |
| STREET ADDRESS | 3805 SW 8 ST. | | 4.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | MIAMI FL | | 4.4 CITY-ST-ZIP | | | |
| TITLE | | DELETE | 5.1 TITLE | | Change Addition | |
| NAME | | | 5.2 NAME | | | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | | | 5.4 CITY-ST-ZIP | | | |
| TITLE | | DELETE | 6.1 TITLE | | Change Addition | |
| NAME | | | 6.2 NAME | | | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | | | 6.4 CITY-ST-ZIP | | | |
| | certify that the information supplied with | this filing does not qualify for | | 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 attachmost with an address.