

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

FILED
May 07 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **PA6000021934**
 Corporation Name
mi Tierra cafe' corp

Principal Place of Business Mailing Address
5721 NW 36ST
Virginia Gardens, FL 33166

21	22	23	24	25	26	27	28	29	30
2. Principal Place of Business		2a. Mailing Address		4. FFL Number		3a. Date of Last Report			
5721 NW 36ST		5721 NW 36ST		65-0650027		05/01/1996			
Suite, Apt. #, etc		Suite, Apt. #, etc.		5. Certificate of Status Desired		Applied Fee			
V				<input type="checkbox"/>		\$8.75 Additional Fee Required			
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution		Applied Fee			
Virginia Gardens		Virginia Gardens, FL		<input type="checkbox"/>		\$5.00 May Be Added to Fees			
Zip		Country		6. This corporation has liability for intangible tax under s. 199.03, Florida Statutes		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			
33166		USA							
Zip		Country							
33166		USA							

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
Esperanza Rodriguez		Esperanza Rodriguez	
557 DE SOTO DR		5721 NW 36ST	
miami springs FL 33166		Virginia gardens	
		City	
		FL	
		Zip Code 33166	

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 obligation of, Section 607.0505, Florida Statutes.

SIGNATURE **Esperanza Rodriguez** DATE **4/29/97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	Esperanza Rodriguez	1.2 NAME	
STREET ADDRESS	5721 NW 36ST	1.3 STREET ADDRESS	
CITY-ST-ZIP	Virginia Gardens FL 33166	1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME		6.2 NAME	300002180813
STREET ADDRESS		6.3 STREET ADDRESS	-05/16/97--01014--027
CITY-ST-ZIP		6.4 CITY-ST-ZIP	***165.00

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. 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: **Esperanza Rodriguez** DATE **4/29/97**



3. Date of Last Report or Qualified **3-11-96** 3a. Date of Last Report **05/01/1996**

4. FFL Number **65-0650027** Applied Fee **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

6. This corporation has liability for intangible tax under s. 199.03, Florida Statutes Yes No

01	Name	Esperanza Rodriguez
02	Street Address (P.O. Box Number is Not Acceptable)	5721 NW 36ST
03	City	Virginia gardens
04	State	FL
05	Zip Code	33166

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NAME	Esperanza Rodriguez	1.2 NAME	
STREET ADDRESS	5721 NW 36ST	1.3 STREET ADDRESS	
CITY-ST-ZIP	Virginia Gardens FL 33166	1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME		5.2 NAME	
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SIGNATURE: **Esperanza Rodriguez** DATE **4/29/97** (305) 870-9902