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FILED

Apr 24 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 # P96000030299 (7)

1. Corporation Name

LA CANTINA BEACHSIDE, INC.

Principal Place of Business

8803 NO ATLANTIC AVENUE
CAPE CANAVERAL FL 32920-3405

Mailing Address

8803 NO ATLANTIC AVENUE
CAPE CANAVERAL FL 32920-3405

3. Date Incorporated or Qualified

04/08/1996

3a. Date of Last Report

This is 1st Report

4. FEI Number

59-3375597

Applied For

Not Applicable

6. 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

2. Principal Place of Business

21 SAME AS ABOVE

2a. Mailing Address

26 SAME AS ABOVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

24 25 U.S.A.

29 30 U.S.A.

9. Name and Address of Current Registered Agent

DODD, BEVERLY P
8762 BANYAN WAY
CAPE CANAVERAL FL 32920

10. Name and Address of New Registered Agent

81 Name

NONE

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

83

84 City

FL

85 Zip Code

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

Beverly Priddy Dodd

BEVERLY PRIDDY DODD

DATE

4/17/97

12. OFFICERS AND DIRECTORS

TITLE TREASURER
NAME BEVERLY PRIDDY DODD
STREET ADDRESS 8762 BANYAN WAY
CITY- ST- ZIP Cape Canaveral, FL 32920

TITLE
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CITY- ST- ZIP

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CITY- ST- ZIP

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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: Beverly P. Dodd

BEVERLY PRIDDY DODD

DATE

4/17/97

784-4060

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Day Phone #

010161

CR2E034 (9/96)