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Mar 21 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 # P96000056720 (1)

1. Corporation Name
RESTAURANTE EL PLATANAL, INC

Principal Place of Business
10461 SW 40TH ST.
MIAMI FL 33165

Mailing Address
10461 SW 40TH ST.
MIAMI FL 33165-3753



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/05/1996		3a. Date of Last Report	
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 05-0716539		Applied For		Not Applicable	
22. City & State	27. City & State	5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required			
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees			
24. Country	29. Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No					
9. Name and Address of Current Registered Agent RAMIREZ, MARIA F 10461 SW 40TH ST. MIAMI FL 33165				10. Name and Address of New Registered Agent			
				81. Name	DENIS A. VASQUEZ		
				82. Street Address (P.O. Box Number is Not Applicable)	10461 SW 40 STREET		
				83.			
				84. City	MIAMI		85. State
					FL		33165

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 fully aware and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: *Denis A. Vasquez* DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE	DPS	1.1 TITLE	☐ Change ☒ Addition
2. NAME	RAMIREZ, MARIA F	1.2 NAME	DENIS A. VASQUEZ
3. STREET ADDRESS	10461 SW 40TH ST.	1.3 STREET ADDRESS	10461 S.W. 40 STREET
4. CITY - ST - ZIP	MIAMI FL 33165	1.4 CITY - ST - ZIP	MIAMI, FL 33165
5. TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
6. NAME		2.2 NAME	
7. STREET ADDRESS		2.3 STREET ADDRESS	
8. CITY - ST - ZIP		2.4 CITY - ST - ZIP	
9. TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
10. NAME		3.2 NAME	
11. STREET ADDRESS		3.3 STREET ADDRESS	
12. CITY - ST - ZIP		3.4 CITY - ST - ZIP	
13. TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
14. NAME		4.2 NAME	
15. STREET ADDRESS		4.3 STREET ADDRESS	
16. CITY - ST - ZIP		4.4 CITY - ST - ZIP	
17. TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
18. NAME		5.2 NAME	
19. STREET ADDRESS		5.3 STREET ADDRESS	
20. CITY - ST - ZIP		5.4 CITY - ST - ZIP	
21. TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
22. NAME		6.2 NAME	
23. STREET ADDRESS		6.3 STREET ADDRESS	
24. CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I 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: *Denis A. Vasquez* DATE: 3-14-97 DAYTIME PHONE: 227 8454

CR2E034 (9/96)