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 # P96000063400 (1)

BRAZIL CUBA CAFE, INC.

FILED Apr 29 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						r obelikati sin obith Antil Edisi dasir danil Antil Basin gaben sirin grafi Antil Edit Ladi	
1722 WEST HILLSBORO BLVD. 1722 WEST HILLSBORO BLVI			BLVD.				
DEERFIELD BI	EACH FL	DEERFIELD BEACH FL				DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified	
						1	
9 Principal P	ace of Business	2s. Mailing Address				07/26/1996 4. FEI Number Applied For	
2. Principal Place of Business		├- ŋ *					
Suite, Apt. #, etc.		Suite, Apt. #, etc.				\$0.75 Auddings	
22		27				5. Certificate of Status Desired Fee Required	
City & State		City & State					
23		28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip Country		Zip Country		,	This corporation owes or has paid the current year Intangible		
24	25	29	30			Personal Property Tax due June 30. Yes No	
24	g, Name and Address of Current	_ 1 - 1	1301	T		10. Name and Address of New Registered Agent	
				81	Name		
	STA, WALTER						
	2 West Hillsboro Blvd. Erfield Beach Fl			82	Street A	ddress (P.O. Box Number is Not Acceptable)	
V-1				83			
				84	City	FL 85 Zip Code	
44 Durayanti	to the provisions of Sections 607 0503	and CO7 1509 Florida Statut	on the n	DO://	o pormod o		
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							
	Signature, typed or printed name of registered ager			d Age	ni signalure re	required when reinstating) DATE	
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	DELETE	1.170			Change Addition	
NAME	COSTA, WALTER		1.2 N				
STREET ADDRESS	1722 WEST HILLSBORO BLVD).	1.3 S	TREET	ADDRESS		
CITY-ST-ZIP	DEERFIELD BEACH FL				T-ZIP		
TITLE	D	☐ DELETE	2.1 Ti			Change Addition	
NAME	COSTA, VILMA		2.2 N	AME			
STREET ADDRESS	1722 W HILLSBORO BLVD		2.3 S	TREET	ADDRESS	f	
CITY-S1-ZIP	DEERFIELD BEACH FL		2.40	ITY-S	ST-ZIP		
TITLE	☐ DELETE 3.11		TLE]	Change Addition		
NAME			3.2 N	AME			
STREET ADDRESS			3.3 \$	TREET	ADDRESS		
CITY-ST-ZIP			3.4. 0	ITY-S	ST-ZIP		
TITLE		☐ DELETE	4.1 7	TLE	Ī	☐ Change ☐ Addition	
NAME			4.21	IAME	1		
STREET ADDRESS			4.3 5	TREET	ADORESS		
CITY-ST-ZIP			4.4 C	ITY - S	T-ZIP		
TITLE		☐ DELETE	5.1 Ti	TLE		. Change Addition	
NAME			5.2 N	AME	-		
STREET ADDRESS			1		ADDRESS		
CITY-ST-ZIP					T-ZIP		
TITLE		DELETE	6.1 TI		-	☐ Change ☐ Addition	
NAME			62 N			- · · · ·	
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP					T-ZIP		
₩111 ₩1°40			0.70				

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 suppliemental 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, from an attachment with an address.

(954)7255500