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FILED
May 12 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Morthag
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000081563 (4)

1. Corporation Name
LA ESQUINA CALIENTE, INC.



Principal Place of Business

13280 NW 43 AVENUE
OPA LOCKA FL 33054

Mailing Address

13280 NW 43 AVENUE
OPA LOCKA FL 33054-4438

3. Date Incorporated or Qualified

09/30/1996

3a. Date of Last Report

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

4. FEI Number

65-0704997

Applied For

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes ☒ No

9. Name and Address of Current Registered Agent

HERNANDEZ, MARIA A
9365 FOUNTAINEBLEAU BLVD. (E-19)
MIAMI FL 33172

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

YOHANI DEMORIZI

9365 Fountainebleau Blvd. E-219

MIAMI, FL.

FL

85 Zip Code

33172

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

Yohani Demorizi

(NOTE: Registered Agent signature required when reinstating)

2/18/97

DATE

12. OFFICERS AND DIRECTORS

TITLE PSTD
NAME HERNANDEZ, MARIA A
STREET ADDRESS 9365 FOUNTAINEBLEAU BLVD. (E-19)
CITY-ST-ZIP MIAMI FL 33172

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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STREET ADDRESS
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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 NAME YOHANI DEMORIZI ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 9365 Fountainebleau Blvd. E 219
1.4 CITY-ST-ZIP MIAMI, FL 33172

2.1 NAME (Sec/Treas.) ARMANDO FRABES ☐ Change ☒ Addition
2.2 NAME
2.3 STREET ADDRESS 11440 SW 2 ST #101
2.4 CITY-ST-ZIP MIAMI FL 33174

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
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, or on an attachment with an address.

SIGNATURE:

Yohani Demorizi

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/18/97 305

DATE

Daytime Phone

CR2E034 (9/96)