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FILED

May 04 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P96000084449 (3)

1. Corporation Name

EL SHOW DE MIAMI, INC.

Principal Place of Business

17911 NORTH WEST 68TH CRT. CIRCLE  
MIAMI LAKES FL 33015  
US

Mailing Address

9879 NOB HILL LN  
SUNRISE FL 33351  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/08/1996

4. FEI Number

65-0757661

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 1401 SW 124th CT.

Suite, Apt. #, etc

22 UNIT C

City & State

23 MIAMI FL

Zip

Country

24 33184-2376 25 USA

2a. Mailing Address

26 1401 SW 124th CT.

Suite, Apt. #, etc.

27 UNIT C.

City & State

28 MIAMI FLORIDA

Zip

Country

29 33184-2376 30 USA

9. Name and Address of Current Registered Agent

DE DIOS TORRES, JUAN  
17911 NORTH WEST 68TH CRT. CIRCLE  
MIAMI LAKES FL 33015

10. Name and Address of New Registered Agent

81 Name

GERARDO VERA

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

83

1401 SW 124th Ct - UNIT C

84

City MIAMI

FL

85 Zip Code

33184-2376

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

GERARDO VERA TD

4/24/98

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PD  
DE DIOS TORRES, JUAN  
STREET ADDRESS 17911 NORTH WEST 68TH CRT. CIRCLE  
CITY - ST - ZIP MIAMI LAKES FL 33015

TITLE ☐ DELETE

NAME TD  
VERA, GERARDO  
STREET ADDRESS 17911 NORTH WEST 68TH CRT. CIRCLE  
CITY - ST - ZIP MIAMI LAKES FL 33015

TITLE ☐ DELETE

NAME VPD  
CARRILO, MARIA GRABIELA  
STREET ADDRESS 17911 NORTH WEST 68TH CRT. CIRCLE  
CITY - ST - ZIP MIAMI LAKES FL 33015

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
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 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: GERARDO VERA

4/24/98 (305)2257051

CR2E034 (10/97)