

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

FILED

May 28 1998 8:00am
Secretary of State

DOCUMENT # P 96000093944
1. Corporation Name
Delicia's Cafeteria, Inc

Principal Place of Business
51 S.W. 1st Ave.
Suite 204
Miami, Florida 33130
Mailing Address
51 S.W. 1st Ave.
Suite 204
Miami, Florida 33130

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
11-18-96
4. FEI Number
65-0709880
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
21 110 N.W. 116th Street
Suite, Apt. #, etc.
22 City & State
Miami, Florida
Zip
33168
Country
U.S.
2a. Mailing Address
25 110 N.W. 116th Street
Suite, Apt. #, etc.
27 City & State
Miami, Florida
Zip
33168
Country
U.S.

9. Name and Address of Current Registered Agent

Leslie R. Francis
51 S.W. 1st Ave.,
Suite 204
Miami, Florida 33130

10. Name and Address of New Registered Agent

81 Name
Leslie R. Francis
82 Street Address (P.O. Box Number is Not Acceptable)
110 N.W. 116th Street
83
84 City
Miami
FL 85 Zip Code
33168

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 of the corporation and the applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS
11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP
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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 provided in this 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 recipient 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: - Leslie R. Francis
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-27-98

(305) 372-9090

CR2E034 (10/97)