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Mar 03 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 # P96000100482 (4)

1. Corporation Name  
LITTLE HAVANA MIAMI INC.



Principal Place of Business Mailing Address  
25 S.E. 2ND AVENUE, SUITE 730  
C/O BLAXBERG, GRAYSON & SINGER, P.A.  
MIAMI FL 33131  
25 S.E. 2ND AVENUE, SUITE 730  
C/O BLAXBERG, GRAYSON & SINGER, P.A.  
MIAMI FL 33131-1544

3. Date Incorporated or Qualified 12/12/1996  
3a. Date of Last Report

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip Country 28 Zip Country  
24 25 29 30

4. FEI Number 65-0727504 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  
GRAYSON, MOISES T ESQ.  
25 S.E. 2ND AVENUE, SUITE 730  
C/O BLAXBERG, GRAYSON & SINGER, P.A.  
MIAMI FL 33131

10. Name and Address of New Registered Agent  
81 Name FELIPE A. VALLS, JR  
82 Street Address (P. O. Box Number is Not Acceptable) 700 S.W. 36th AVE  
83  
84 City MIAMI FL 85 Zip Code 33135

11. Pursuant to the provisions of Sections 607.0102 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 *Felipe A. Valls Jr.* Felipe A. Valls Jr. PRES. DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	VALLS, FELIPE	
STREET ADDRESS	700 S.W. 36TH AVENUE	
CITY - ST - ZIP	MIAMI FL 33135	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	VALLS, JR., FELIPE A	
1.3 STREET ADDRESS	700 S.W. 36th AVE	
1.4 CITY - ST - ZIP	MIAMI, FL. 33135	
2.1 TITLE	SECRETARY	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	VALLS, SR. FELIPE, A	
2.3 STREET ADDRESS	700 S.W. 36th AVE	
2.4 CITY - ST - ZIP	MIAMI, FL. 33135	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 if changed or on an attachment with an address.

SIGNATURE: *Felipe Valls Jr.* Felipe Valls Jr, PRESIDENT 2-19-97 446-4916  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0002871

CR2E034 (9/96)