FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700016195 (4)

Principal Place of Business	Mailing Address			
12106 SW 117 CT. MIAMI FL 33186	12106 SW 117 CT. Miami Fl 33186			

FILED Feb 26 1998 8:00am Secretary of State

1. Corporatio	S CAFE INC.	,0010100	· (=•)				
Principal Place	e of Business	Mailing Addre	ss				P) 0111 1881
12106 SW 117 CT. 12106 SW 117 CT MIAMI FL 33186 MIAMI FL 33186						DO NOT MIDITE IN THIS SPACE	
						DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified 02/20/1997	
2. Principal P	lace of Business	2a. Mailing Ad	dross				pplied For
21		26				1 (C (M) 1 () 1 () 1	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt.	#, etc.			\$8.75	Additional
22		27					equired
City & Stati	9	City & State	3			6. Election Campaign Financing \$5.00	May Be
23		28					to Fees
Zip	Country	Zip	<u> </u>	Country		8. This corporation owes or has paid the current year in	
24	25 9. Name and Address of Curi	29] rent Registered Agent]3	<u>ן טי</u>	· · · · · · · · · · · · · · · · · · ·	Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent	No
MAIL	PIER, HENRY		·	81	Name	145 Senting anim Limitanam of Hats Hoffigerora's sifferit	
	06 SW 117 CT.				0		
	MI FL 33186			82	Street Add	dress (P.O. Box Number is Not Acceptable)	
INI	1441 1 E 00 100			83			
				امما	-0.4		6.4
				64	City	PL ()	Code
SIGNATURE						poration submits this statement for the purpose of changing ation's board of directors. I hereby accept the appointment as	registered
	Signature, typed or ported name of registered	agent and little if applicable AND DIRLCTORS	(NOTE I		nt signature requ	ulred when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	00 111 40
TITLE	D OFFICINS		DELETE	13. 1.1 TITLE	····	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	Addition
NAME	NAPIER, HENRY	-		1.2 NAME		Crange	
STREET ADDRESS	12106 SW 117 CT.			1.3 STREET	ADDRESS		
CITY-ST-ZIP	MIAMI FL 33186			1.4 CITY-SI			
TITLE			DELETE	2.1 TITLE		Change	Addition
NAME				2.2 NAME			
STREET ADDRESS				2.3 STREET	ADDRESS		
City-St-ZiP				2 4 CITY-S	T-ZIP		
TITLE			DELETE	3.1 TITLE		Change	Addition
NAME				32 NAME			
STREET ADDRESS				3.3 STREET	ADDRESS		
CITY-ST-ZIP		· ·	DC+ C 16	3 4. C(TY - S	T-ZIP	5-1 Xi'	T graner.
TITLE		LJ	DELETE	41 TITLE		Change	☐ Addition
NAME STORES ADDOCAGO				4 2 NAME			
STREET ADDRESS				4.3 STREET			
CITY-ST-ZIP TITLE			DELETE	44 CITY-ST 51 TITLE	- ZIP	☐ Change	Addition
NAME				52 NAME			Beef - Indicipit
STREET ADDRESS				5.3 STREET	ADDRESS		
CITY-ST-ZIP				54 City-Si			
TITLE			DELETE	61 TITLE		Change	Addition
NAME				6.2 NAME		· · · · · · · · · · · · · · · · · · ·	
STREET ADDRESS				6.3 STREET	address		
CITY-ST-ZIP				6 4 City-St	-ZIP		

14. Thereby 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 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.

2-19-98