COR ANNU	PROFIT PORATION AL REPORT		AFTER MAY 1ST IS \$550.00 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED Mar 05, 1999 8:00 an Secretary of State 03-05-1999 90040 008 ***150.00		
 Corporation 	MENT # P97 Name DAST BURRITO FACT			NC.		I OCHI THIL CONTRACION	TATH AND AND AND ADD
Principal Place	of Business		ling Address				
71 E. Commer T. Lauderdali			e. Commercial Blvd. Lauderdale FL 33334		DO NOT W 3. Date Incorporated or Qualif	RITE IN THIS SP	ACE
Príncipal Pí	ace of Business	22	Mailing Address		07/02/1997	<u> </u>	Applied For
1		26		<u> </u>	APPRLIED ARDA 65-	0847732	Not Applicable
Suite, Apt. #	¥, etc.	27	Suite, Apt. #, etc.		5. Certifcate of Status Desired		8.75 Additional Fee Required
City & State	,	28	City & State		6, Election Campaign Financir Trust Fund Contribution	^{ng}	\$5.00 May Be Added to Fees
21 Zip	Country 25		Zip	Country 30	8. This corporation owes the opersonal Property Tax.	· •	ible Ves ⊡No
	9. Name and Address of	of Current Registe	ered Agent	81 Name	10. Name and Address of Ne	w Registered Age	int
TRAG	ER, ROSS CPA			82 Street Add	dress (P.O. Box Number is Not Acce	eptable)	<u></u>
100 N Peme	n hiatus road Broke pines fl 33026)	83 84 City	moration submits this statement for	FLI	15 Zip Code
100 N PEME 1. Pursuant lt office or re agent. I an SIGNATURE 3.	BROKE PINES FL 33026 o the provisions of Sections ogistered agent, or both, in t in familiar with, and accept to Signature, typed or ponted name of re- OFFIC	s 607.0502 and 60 the State of Florida the obligations of S	applicable.	84 City es, the above-named cor thorized by the corporat ida Statutes. Registered Agent signature requi	rporation submits this statement for tion's board of directors. I hereby ac ired when reinstating) ADDITIONS/CHANGES TO	The purpose of cha ccept the appointm DATE OFFICERS AND D	Inging its registered ent as registered
100 N PEME	BROKE PINES FL 33026 o the provisions of Sections rgistered agent, or both, in t in familiar with, and accept to Signature, typed or ponted name of re-	s 607.0502 and 60 the State of Forries the obligations of s gistered eacht and title if a	applicable, MTE:	84 City es, the above-named cor thorized by the corporat ida Statutes. Registered Agent signature requi	ired when reinstating)	The purpose of cha ccept the appointm DATE OFFICERS AND D	inging its registered ent as registered
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100 N PEME	SROKE PINES FL 33026 o the provisions of Sections gistered agent, or both, in t in familiar with, and accept to Signature, typed or ponted name of re- OFFIC D LEVIN, NED 271 E. COMMERCIAL E FT. LAUDERDALE FL 3 D BROWN, JEFFREY M 271 E. COMMERCIAL E	s 607.0502 and 60 the State of Provide the obligations of S gistered agent and title if CERS AND DIREC BLVD. 3334 BLVD.	applicable. Latter TORS DELETE	84 City iss, the above-named conthonized by the corporation of the corporation of the corporation of the statutes. 13. 1.1 11.1 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	ired when reinstating)	The purpose of char ccept the appointm DATE OFFICERS AND D	DIRECTORS IN 12
100 N PEME	BROKE PINES FL 33026 o the provisions of Sections rgistered agent, or both, in t n familiar with, and accept t Signature, typed or printed name of re- OFFIC D LEVIN, NED 271 E. COMMERCIAL E FT. LAUDERDALE FL 3 D BROWN, JEFFREY M	s 607.0502 and 60 the State of Provide the obligations of S gistered agent and title if CERS AND DIREC BLVD. 3334 BLVD.	applicable. Latter TORS DELETE	84 City iss, the above-named contribution Corporation ithorized by the corporation Statutes. Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	ired when reinstating)	DATE	DIRECTORS IN 12
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