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

DOCUMENT # P97000069558 (9)

POLLO EL CAPORAL, INC.

FILED Mar 24 1998 8:00am Secretary of State



Principal Plac	ce of Business	Mailing Address			T I CONTINUE THE TOTAL HOUSE CONTINUENT CONT
2656 SW 137TH AVE 2656 SW 137TH AVE MIAMI FL 33175 MIAMI FL 33175					DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified 08/12/1997
2. Principal Place of Business 2a. Mailing Address					4. FEI Number Applied For
21 26				65-0773293 Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired S8.75 Additional
22 27					Fee Required
City & State		City & State	28		B. Election Campaign Financing Trust Fund Contribution Added to Fees
Zip Country		Zip Country		ntry	8. This corporation owes or has paid the current year Intangible
24	25	29	30		Personal Property Tax due June 30. Yes No
	9. Name and Address of Curr	ent Registered Agent		· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New Registered Agent
i LA	IZO, PEDRO		ŀ	81 Name	
1351 SW 70TH AVE			-	82 Street Add	ress (P.O. Box Number is Not Acceptable)
ML	AMI FL 33144				
			ľ	63	
			ļ	84 City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0	502 and 607 1508. Florida State	utes the ab	ove-pamed core	rporation submits this statement for the purpose of changing its registered
office or r agent. I a	registered agent, or both, in the Sta im familiar with, and accept the obl	te of Florida Such change was gations of, Section 607.0505, f	s authorized Florida Statu	by the corpora	ation's board of directors. I hereby accept the appointment as registered
SIGNATURE					
12.	Signature, typed or printed name of registered a	igent and title if applicable (NO ND DIRECTORS	DTE: Registered	Agent signature requi	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PVST	DELETE	1.1 TITU	E T	Change Addition
NAME	LAZO, PEDRO		1.2 NAJ		•
STREET ADDRESS	1351 SW 70TH AVEE			EET ADORESS	
CITY-ST-ZIP	MIAMI FL 33144			Y-ST-ZIP	
TITLE	D	DELETE	2 1 TITL	.E	☐ Change ☐ Addition
NAME	LAZO, PEDRO		2.2 NA	ME	
STREET ADDRESS	1351 SW 70TH AVEE		2.3 STR	EET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33144		2. 4 CIT	Y - ST - ZIP	
TITLE		☐ DELETE	3.1 7170	· .	☐ Change ☐ Addition
NAME			3.2 NAM	1	
STREET ADORESS				EET ADDRESS	
CITY-ST-ZIP TITLE		DELETE	3.4. CIT 4.1 TITL	Y-ST-ZIP	Change Addition
NAME			4.1 HIL 4.2 NA	-	Onange Mounton
STREET ADDRESS				EET ADDRESS	
CITY-ST-ZIP				Y-ST-ZIP	
TITLE		☐ DELÉTÉ	5.1 TITL		Change AddItion
NAME			5.2 NAN	AE	·
STREET ADDRESS			5.3 STR	EET ADDRESS	
CITY-ST-ZIP			5.4 CITY	r-ST-ZIP	
TITLE		☐ DELETE	6.1 TITL	E	Change Addition
NAME			6.2 NAN	AE	
STREET ADDRESS			6.3 STR	eet address	
CITY-ST-ZIP				/-ST-ZIP	
14. I herehy o	partify that the information supplied	with this filing does not qualify	for the ever	nntion stated in	Section 119 07(3)(i) Florida Statutes I further certify that the information

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119-07(5)(i), reprine statutes. Finding the minimal 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 of 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 chapter 607 at a statement with an address.