

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000072252

FILED
Jan 05, 2005
Secretary of State

Entity Name: LATIN AMERICAN CONCESSIONS, INC.

Current Principal Place of Business:

MIAMI INTERNATIONAL AIRPORT
P.O BOX 997180
MIAMI, FL 33299

New Principal Place of Business:

Current Mailing Address:

MIAMI INTERNATIONAL AIRPORT
P.O BOX 997180
MIAMI, FL 33299

New Mailing Address:

FEI Number: 65-0780410 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENCOMO, ESTEBAN
2411 SW 124 AVE
MIAMI, FL 33175 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: BENCOMO, ESTEBAN
Address: 2472 NW 21 TERRACE
City-St-Zip: MIAMI, FL 33142

Title: P () Delete
Name: BENCOMO, MIGDALIA
Address: 2472 NW 21 TERRACE
City-St-Zip: MIAMI, FL 33142

Title: VPS () Delete
Name: AMARO, PEDRO JR
Address: 142740 SW 33 ST
City-St-Zip: MIAMI, FL 33175

Title: VP () Delete
Name: THEOSEVIS, DIMOS
Address: 16020 SW 105
City-St-Zip: MIAMI, FL 33196

Title: T () Delete
Name: ALBERNI, JOSE G
Address: 801 HARBOR DR
City-St-Zip: KEY BISCAYNE, FL 33146

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: AMARO, PEDRO JR
Address: 142740 SW 33 ST
City-St-Zip: MIAMI, FL 33175

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSE G ALBERNI

T

01/05/2005

Electronic Signature of Signing Officer or Director

_____ Date