

2001 UNIFORM BUSINESS REPORT (UBR)

07-19-2001 90232 001 ***550.00
P97000076902

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DOCUMENT # P97000076902
1. Entity Name
LA TABERNA OF CORAL GABLES, INC.

FILED
01 AUG -8 AM 11: 35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
80060150

Principal Place of Business: **3850 SW 8TH STREET CORAL GABLES FL 33134**
Mailing Address: **% JULIAN HERNANDEZ 1150 N. 72ND AVENUE #307 MIAMI FL 33126**

2. Principal Place of Business: Suite, Apt. #, etc.
3. Mailing Address: Suite, Apt. #, etc.
City & State: City & State
Zip: Country Zip: Country

4. FEI Number **65-0779108** Applied For Not Applicable
5. Certificate of Status Desired **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
**JIMENEZ, ALBERTO R
3850 SW 8TH STREET
CORAL GABLES FL 33134**

7. Name and Address of New Registered Agent
Name: _____
Street Address (P.O. Box Number is Not Acceptable): _____
City: _____ **FL** Zip Code: _____

8. 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: *[Signature]* (NOTE: Registered Agent signature required when reinstating) DATE: _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS	
TITLE: VP	BECHERRILL, ROSA A 3850 SW 8TH STREET CORAL GABLES FL 33134 <input checked="" type="checkbox"/> Delete
TITLE: PT	JIMENEZ, ALBERTO R 3850 S.W. 8TH STREET CORAL GABLES FL 33134 <input checked="" type="checkbox"/> Delete
TITLE: S	VALDES, JUAN E 4160 W. 16TH AVENUE, #402 HALEAH FL 33012 <input type="checkbox"/> Delete
TITLE: _____	_____ <input type="checkbox"/> Delete
TITLE: _____	_____ <input type="checkbox"/> Delete
TITLE: _____	_____ <input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: PT	AMALIA HERRERO TAO 3250 SW 8 Street Coral Gable, FL 33134 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: _____	_____ <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: _____	_____ <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: _____	_____ <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: _____	_____ <input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* **AMALIA HERRERO TAO** 7-12 01 305-448-9323
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/01)