

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION  
ANNUAL REPORT

1998 AMENDED



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

FILED

98 NOV 23 PM 12:04

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Corporation Name

P97000083305

DELICATESSEN, PAN'S & COMPANY, INC.

Principal Place of Business

Mailing Address

3301 Coral Way  
Local AF-4  
Miami, Florida 33145

3301 Coral Way  
Local AF-4  
Miami, Florida 33145

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

09/25/97

3a. Date of Last Report

04/98

2. Principal Place of Business

2a. Mailing Address

21 3301 Coral Way

25 3301 Coral Way

4. FEI Number

65-0787767

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Local AF-4

27 Local AF-4

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

City & State

City & State

23 Miami, FL.

28 Miami, FL.

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

Zip

Country

24 33145

25 U.S.A.

Zip

Country

29 33145

30 U.S.A.

8. This corporation has liability for intangible tax under S. 199.032.

Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Torrens, Jose, M.  
7020 SW 112 Ct.  
Miami, FL. 33173

81 Name

Eseverri, Jose, J.

82 Street Address (P.O. Box Number is Not Acceptable)

83 3301 Coral Way, Local AF-4

84 City  
Miami

FL

85 Zip Code  
33145

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE ☒ (Jose J. Eseverri)

11-17-98

Signature of registered agent and time if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P/D/T Delete  
NAME Torrens, Jose, M.  
STREET ADDRESS 7020 SW 112 Ct.  
CITY-ST-ZIP Miami, FL. 33173

1 1 TITLE P/D/S/T ☒ Change ☒ Addition  
1 2 NAME Eseverri, Jose, J.  
1 3 STREET ADDRESS 1207 SW 131 Place Circle West  
1 4 CITY-ST-ZIP Miami, FL. 33184

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

2 1 TITLE VP/D ☐ Change ☒ Addition  
2 2 NAME Ballesteros, Pedro  
2 3 STREET ADDRESS Calle Las Marias, Qta. Bambu #14-04  
2 4 CITY-ST-ZIP Country Club, Caracas, Venezuela

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3 1 TITLE ☐ Change ☐ Addition  
3 2 NAME 800002703728-4  
3 3 STREET ADDRESS -12/04/98-01103-004  
3 4 CITY-ST-ZIP \*\*\*\*\*61.25 \*\*\*\*\*61.25

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4 1 TITLE ☐ Change ☐ Addition  
4 2 NAME  
4 3 STREET ADDRESS  
4 4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5 1 TITLE ☐ Change ☐ Addition  
5 2 NAME  
5 3 STREET ADDRESS  
5 4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6 1 TITLE ☐ Change ☐ Addition  
6 2 NAME  
6 3 STREET ADDRESS  
6 4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information 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 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.

SIGNATURE: ☒ (Jose J. Eseverri)

11-17-98

(305) 476-9100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #