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 # P97000093339 (4)

MEXICAN CATERING AND REAL ESTATE SERVICES, INC.

Principal Place of Business	Mailing Address		
2588 SW 27 AVE MIAMI FL 33133	2588 SW 27 AVE MIAMI FL 33133		

FILED Apr 07 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						r 1001(128) (10 181)(129); SEIII ACISI OBIII DDIIA ISIAD 11109 (1118 (1114 151) 192(
2588 SW 27 AVE 2588 SW 27 AVE MIAMI FL 33133								DO NOT WRITE IN THIS SPACE	
								3. Date Incorporated or Qualified	7
								10/30/1997	
2. Principal P	Place of Busin	1088	2a. Ma	iling Address				4. FEI Number Applied For	
21			26					65-0794109 Not Applicable	•
Suite, Apt.	#, etc.		Sυ	te, Apt. #, etc				5 Certificate of Status Desired 38.75 Additional	
22			27					Fee Required	
City & State	e		City	y & State				Election Campaign Financing \$5.00 May Be	
23			28					Trust Fund Contribution Added to Fees	4
Zip	ļ	Country	Zφ	•	⊢ –¬	intry	•	8. This corporation owes or has paid the current year Inlangible	
24		25 and Address of Cu	[29]	d Anoma	30	_		Personal Property Tax due June 30. Yes X No 10. Name and Address of New Registered Agent	
			ment registere	u Agent		81	Name	10. Name and Address of New Registered Agent	\dashv
		TE, GUILLERMO				('	rvanio		Ţ
	88 SW 27 /					82	Street Addr	ress (P.O. Box Number is Not Acceptable)	7
Mi/	AMI FL 331	33				83			\dashv
						63			
						64	City	FI 85 Zip Code	٦
dd Durauant	to the eresis	ions of Spotiary CO	W.02 and CO7 1	500 Florido Statu	toe the e	D 01/4	a named pare	poration submits this statement for the purpose of changing its registered	4
office or r agent. I a	registered ag am familiar wi	jent, or both, in the 5 th, and accept the 6	State of Florida. \$ obligations of, Se	Such change was ction 607,0505, F	authorize Iorida Sta	d by lutes	the corporat s.	tion's board of directors. I hereby accept the appointment as registered	
SIGNATURE									
	Signature typed	or probed name of regular				d Age	ent signature requir	red when reinstating) DATE	-16
12.	DOTO	OFFICERS	AND DIRECTO	DELETÉ	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition]{
TITLE	PSTD	^ WUST ALIII.E	DMO	T DETELE	1.1 1			Change Adomoi	
NAME		D WHITE, GUILLE N 27 AVE	NMU		1.2 N			·	Į
STREET ADDRESS	1						ADDRESS		Įį
CITY-ST-ZIP TITLE	MIMMI	L 33133		DELETE	1.4 C		T-ZIP	☐ Change ☐ Addition	15
l				L DITTI			ļ	Onlinge Addition	1
NAME DYDEET ADODESS	}				2.2 N		LODGICE .		1
STREET ADDRESS CITY-ST-ZIP					1		ADDRESS ST-ZIP		ſ
TITLE	 			DILETE	3.1 11		\$1-20	Change Addition	\exists
NAME	1				3.2 N				
STREET ADDRESS							ADDRESS		
CITY+ST-ZIP	}						ST-21P		
TITLE				DELETE	4.1 7		· · · · · · · · · · · · · · · · · · ·	Change Addition	7
NAME	[4.28			· —	
STREET ADDRESS	1					-	ADDRESS		
CITY - ST - ZIP	1						T-ZIP		
TITLE	<u> </u>			DELETE	5.1 Ti			Change Addition	ij
NAME	1				5.2 N	AME	1		
STREET ADDRESS	1				5.3 S	TREET	ADDRESS		
CITY-ST-ZIP							T-ZIP		
TITLE	<u> </u>			DELETE	6.1 Ti			Change Addition	1
NAME					6.2 N		\		
STREET ADDRESS							ADDRESS		
CITY-ST-ZIP					1		1-2IP		

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 trusted 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: