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Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P97000099408			
1. Corporation Name MEXICO TACO SHOP, INC.			
Principal Place of Business 20095 S DIXIE HWY MIAMI FL 33189 US		Mailing Address 20095 S DIXIE MIAMI FL 33189 US	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24 25		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29 30	
9. Name and Address of Current Registered Agent AZAMAR, GERARDO 14342 SW 96 LANE MIAMI FL 33186		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 12705 SW 96 TERR 83 84 City miami FL 85 Zip Code 33186	
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	MAIL ADDRESS
NAME	AZAMAR, ERNESTO M	1.2 NAME	
STREET ADDRESS	12705 SW 96 TERR	1.3 STREET ADDRESS	20095 S. DIXIE HWY
CITY-ST-ZIP	MIAMI FL 33186	1.4 CITY-ST-ZIP	MIAMI, FL 33189
TITLE	VD	2.1 TITLE	MAIL ADDRESS
NAME	AZAMAR, VICTOR M	2.2 NAME	
STREET ADDRESS	14342 SW 96 LANE	2.3 STREET ADDRESS	20095 S. DIXIE HWY
CITY-ST-ZIP	MIAMI FL 33186	2.4 CITY-ST-ZIP	MIAMI, FL 33189
TITLE	TD	3.1 TITLE	12705 S.W. 96 Terr
NAME	AZAMAR, GERARDO M	3.2 NAME	
STREET ADDRESS	14342 SW 96 LANE	3.3 STREET ADDRESS	MIAMI, FL 33186
CITY-ST-ZIP	MIAMI FL 33186	3.4 CITY-ST-ZIP	
TITLE	SD	4.1 TITLE	MAIL ADDRESS
NAME	AZAMAR, CHRISTOPHER M	4.2 NAME	
STREET ADDRESS	14342 SW 96 LANE	4.3 STREET ADDRESS	20095 S. DIXIE HWY
CITY-ST-ZIP	MIAMI FL 33186	4.4 CITY-ST-ZIP	MIAMI, FL 33189
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)