

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 13, 1999 8:00 am
Secretary of State

05-13-1999 90016 047 ***150.00

DOCUMENT # P98000006732

Corporation Name
Cafe La Montaine Restaurant, Inc.

Principal Place of Business
300 S.W. 1st Avenue
Fort Lauderdale, Florida 33301

Mailing Address

DO NOT WRITE IN THIS SPACE

1. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

1/22/98

4. FEI Number

650812368

Applied For
Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Donald R. Walters
1401 University Drive, #301
Coral Springs, Florida 33071-6088

81. Name
HKE&F Registered Agent Corp.

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

83. 2601 S. Bayshore Dr., Suite 600

84. City

Miami

FL

85. Zip Code

33131

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, HKE&F Registered Agent Corp.

4/26/99

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

2. OFFICERS AND DIRECTORS

TITLE President/Secretary/
NAME Treasurer/Director
STREET ADDRESS Jean Pierre Ellak
CITY-ST-ZIP 300 S.W. 1st Ave, Ft. Laud, FL 33301

TITLE Vice President/Director
NAME Ilsa Ellak
STREET ADDRESS 300 S.W. 1st Ave, Ft. Laud., FL 33301
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President/Treasurer/Director ☐ Change ☒ Addition
1.2 NAME Maria Isabel Bohbot
1.3 STREET ADDRESS 11811 NE 6 Ave, Biscayne Park, Florida
1.4 CITY-ST-ZIP 33131

2.1 TITLE Vice President/Secretary/
2.2 NAME Director
2.3 STREET ADDRESS Charles Daniel Bohbot
2.4 CITY-ST-ZIP 11811 NE 6 Ave, Biscayne Park, Florida

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP 33131

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
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

ISABEL BOHBOT

4/19/99

(954) 761-9895

Date

Daytime Phone #

CR2024 (1/1/99)