

**FILED**  
**May 29, 2002 8:00 am**  
**Secretary of State**

05-29-2002 93599 024 \*\*\*150.00

**2002 UNIFORM BUSINESS REPORT (UBR)**

**DOCUMENT #**

P98000037995

1. Entity Name

TIENDA MEXICANA MISCELANEA, CORP

Principal Place of Business

2033 N.E. 3RD AVENUE  
DELRAY BEACH FL 33444

Mailing Address

2033 NE. 3RD AVENUE  
DELRAY BEACH FL 33444

2. Principal Place of Business

SAME

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0832304

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

GONZALEZ ANDRES B.  
2033 N.E. 3RD AVENUE  
DELRAY BEACH FL 33444

7. Name and Address of New Registered Agent

Name

SAME

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

*Andres Gonzalez*

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

(NOTE: Registered Agent signature required when reinstating)

5/17/2002

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 \$150.00**

**After MAY 1, 2000 Fee will be \$550.00**

**Make Check Payable to Department of State**

10. Election Campaign Financing

\$5.00

Trust Fund Contribution.

May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PD  
NAME GONZALEZ, ANDRES B.  
STREET ADDRESS 2033 N.E. 3RD AVENUE  
CITY - ST - ZIP DELRAY BEACH FL 33444

Delete

TITLE VD  
NAME GONZALEZ, NELIDA  
STREET ADDRESS 2033 N.E. 3RD AVENUE  
CITY - ST - ZIP DELRAY BEACH FL 33444

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

Delete

TITLE  
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STREET ADDRESS  
CITY - ST - ZIP

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STREET ADDRESS  
CITY - ST - ZIP

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

Change

Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

Change

Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

Change

Addition

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NAME  
STREET ADDRESS  
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STREET ADDRESS  
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Change

Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

Change

Addition

13. 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 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:

*Andres Gonzalez*

5/17/2002

(561) 276-6958

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)