

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 24, 2000 8:00 am
Secretary of State

05-24-2000 90147 019 ***150.00

DOCUMENT # P99000004908
 1. Entity Name: **DELICIAS ESPAÑOLAS**
SPANISH DELIGHTS CORPORATION

Principal Place of Business: **7080 SW. 156 COURT**
MIAMI, FL, 33193
 Mailing Address: **7080 SW. 156 COURT**
MIAMI, FL, 33193

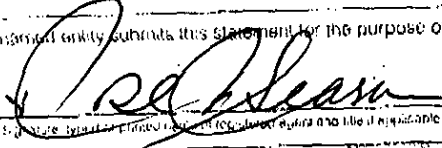
2. Principal Place of Business: **6800 NW 37TH. CT**
 Suite, Apt. #, etc.

3. Mailing Address: **6800 NW. 37TH. CT.**
 Suite, Apt. #, etc.
 City & State: **MIAMI, FL.**
 City & State: **MIAMI, FL.**
 ZIP: **33147-6335** Country: **U.S.A.**
 ZIP: **33147-6335** Country: **U.S.A.**

4. FEI Number: **65-0956376** Applied For: Not Applicable
 6. Certificate of Status Desired: **\$8.75 Additional Fee Required**

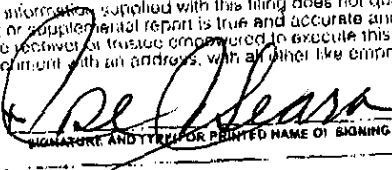
8. Name and Address of Current Registered Agent:
JOSE F. SEARA
7080 SW. 156 COURT
MIAMI, FL, 33193

7. Name and Address of New Registered Agent:
 Name: **JOSE F. SEARA**
 Street Address (P.O. Box Number is Not Acceptable): **6800 NW. 37TH. CT.**
 City: **MIAMI** FL Zip Code: **33147**

9. 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:  **JOSE F. SEARA**
PRESIDENT DATE: **4/28/00**
(NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. **FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2000 Fee will be \$650.00
Make Check Payable to Department of State
 10. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: PRESIDENT	<input type="checkbox"/> Delete	TITLE: PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: JOSE F. SEARA		NAME: JOSE F. SEARA	
STREET ADDRESS: 7080 SW. 156 CT.		STREET ADDRESS: 6800 NW. 37TH. CT.	
CITY-ST-ZIP: MIAMI, FL, 33193		CITY-ST-ZIP: MIAMI, FL, 33147-6335	
TITLE:	<input type="checkbox"/> Delete	TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		NAME:	
STREET ADDRESS:		STREET ADDRESS:	
CITY-ST-ZIP:		CITY-ST-ZIP:	
TITLE:	<input type="checkbox"/> Delete	TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		NAME:	
STREET ADDRESS:		STREET ADDRESS:	
CITY-ST-ZIP:		CITY-ST-ZIP:	
TITLE:	<input type="checkbox"/> Delete	TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		NAME:	
STREET ADDRESS:		STREET ADDRESS:	
CITY-ST-ZIP:		CITY-ST-ZIP:	
TITLE:	<input type="checkbox"/> Delete	TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		NAME:	
STREET ADDRESS:		STREET ADDRESS:	
CITY-ST-ZIP:		CITY-ST-ZIP:	

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 changed, or on an attachment with an address, with all other like empowered.
 SIGNATURE:  **JOSE F. SEARA**
PRESIDENT DATE: **4/28/00** (305) 836-0067
(Name Printed)