

REVISED REPORT

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000024881
1. Entity Name La Plaza Del Vapor, Corp.
Principal Place of Business 11201 S.W. 55th Street Box 381 Miramar, Fl. 33025
Mailing Address 11201 S.W. 55th St. Box 381 Miramar, Fl. 33025

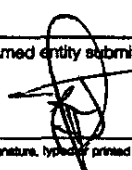
FILED
 01 JUL -9 AM 11:34
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

2. Principal Place of Business 2496 Palm Avenue
3. Mailing Address 750 N.W. 43rd. Avenue
 Suite, Apt. #, etc. Apt. # 608

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0904181 **Applied For** Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
City & State Hialeah, Fl. **City & State** Hialeah, Fl.
Zip 33010 **Country** Dade **Zip** 33126 **Country** Dade

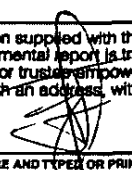
6. Name and Address of Current Registered Agent Valdes, Jose
 11201 S.W. 55th Street
 Box 381
 Miramar, Fl. 33025
7. Name and Address of New Registered Agent Fernandez, Juan Miguel
 Street Address (P.O. Box Number is Not Acceptable) 750 N.W. 43rd Ave
 Apt. # 608
 City Miami, FL Zip Code 33126

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  **DATE** 6/29/2001
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW FEE IS \$61.25 **9. Election Campaign Financing Trust Fund Contribution.** **\$5.00 May Be Added to Fees** **Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD Valdes, Jose <input checked="" type="checkbox"/> Delete 11201 S.W. 55th Street Box 381 Miramar, Fl. 33025	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD Fernandez, Juan Miguel <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 750 N.W. 43rd Ave. Apt. # 608 Miami, Fl. 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Marrero, Martin <input checked="" type="checkbox"/> Delete 1405 West 44th Place Hialeah, Fl. 33012	TITLE NAME STREET ADDRESS CITY-ST-ZIP	700004451517 <input type="checkbox"/> Change <input type="checkbox"/> Addition -07/17/01--01093--028 *****61.25 *****61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **Juan Miguel Fernandez 4/24/01 (305-448-0386)**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day/One Phone #

CR2E037 (11/00)