2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # **P99000084934** TELEMUNDO TERRAZA CAFETERIA, CORP. Mailing Address Principal Place of Business 1621 W. 8 AVE. 🖼 W. 8 AVE. HIALEAH FL 33010-2314 T#15 FL 33010 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Country Ζiρ Country

6. Name and Address of Current Registered Agent

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

OFFICERS AND DIRECTORS

RODRIGUEZ, RAMONA

9. This corporation is eligible to satisfy its Intangible

RODRIGUEZ, PABLO

HIALEAH FL 33010

RODRIGUEZ, RAMONA

1621 W. 8 AVE.

1621 W. 8 AVE.

HIALEAH FL 33010

Tax filing requirement and elects to do so.

1621 W. 8 AVE. HIALEAH FL 33010

(See criteria on back)

11.

TITLE

NAME

TITLE

NAME

TITLE

THE NAME STREET ADDRESS

NAME

TITLE NAME STREET ADDRESS

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

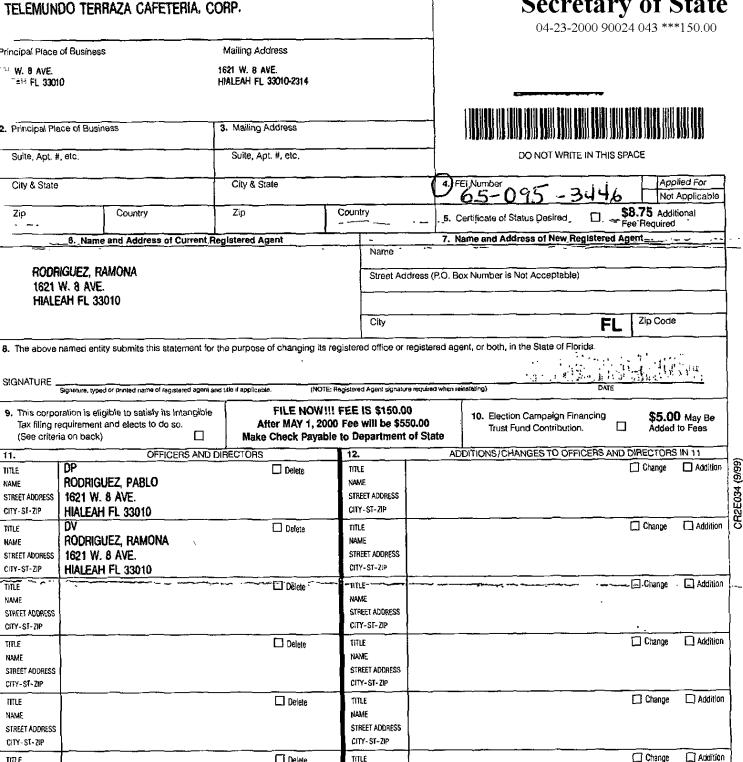
STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

FILED May 18, 2000 8:00 am Secretary of State

4/27/00 000034 042 5550 00 5550 00



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.

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

Make Check Payable to Department of State

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12.

TITLE

NAME

TITLE

TITLE

NAME STREET ADDRESS

TITLE

TITLE NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIFFE