

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S07038

(0)

1. Corporation Name

PADRINO'S RESTAURANT PLANTATION, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 13 AM 10:33

DO NOT WRITE IN THIS SPACE.

Principal Place of Business		Mailing Address	
801 S. UNIVERSITY DR. PLANTATION FL 33324 US		1000 BRICKELL AVE. SUITE 620 MIAMI FL 33131 US	
2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	3a. Date of Last Report
21	26	10/15/1990	04/08/1994
Suite, Apt. #, etc.		4. FEI Number	Applied For
22		59-3039442	Not Applicable
City & State		5. Certificate of Status Desired	\$8.75 Additional Fee Required
23			
Zip		6. Election Campaign Financing	\$5.00 May Be Added to Fees
24	25	Trust Fund Contribution	
Country		8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes	☒ Yes ☐ No
29	30		

9. Name and Address of Current Registered Agent

MORGAN, CHARLES O.
1300 NW 167TH ST
MIAMI FL 33169

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

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

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

(NOTE: Registered Agent signature required when constituting)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	☐ Change ☐ Addition
NAME	PADRINO, MARIO	1.2 NAME	
STREET ADDRESS	701 EL DORADO PARKWAY	1.3 STREET ADDRESS	
CITY - ST - ZIP	PLANTATION FL	1.4 CITY - ST - ZIP	
TITLE	V	2.1 TITLE	☐ Change ☐ Addition
NAME	PADRINO, CANDIDA	2.2 NAME	
STREET ADDRESS	1155 WASHINGTON ST	2.3 STREET ADDRESS	
CITY - ST - ZIP	HOLLYWOOD FL	2.4 CITY - ST - ZIP	
TITLE	YS	3.1 TITLE	☐ Change ☐ Addition
NAME	PADRINO, NAYADE E	3.2 NAME	
STREET ADDRESS	701 EL DORADO PARKWAY	3.3 STREET ADDRESS	
CITY - ST - ZIP	PLANTATION FL	3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 attached sheet with an address.

SIGNATURE:

BIOGRAPHIC AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARIO PADRINO 2-8-95 (305) 476-5777