| DOCUMENT # S79564 1. Entity Name PAMELA'S DELICATESSEN, INC. | | | | | SE OIVIS | FILED CRETARY OF ION OF CORF | STATE ORATION: | index | |
|---|--|--|--|---------------|----------------------------|--------------------------------------|------------------------|------------|----------------------------|
| 8449 SOUTHWEST 40TH STREET 8 | | Mailing Address 8449 SOUTHWEST 40TH STREET MIAMI FL 33155 | | | 110 | 10V -6 PP | 1 12: 05 | "/ | 28 |
| 2. Principal Place of Business | | 3. Mailing Address | | | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | DO NOT WRITE IN THIS SPACE | | | | |
| City & State | | City & State | | 4. F | El Number | 65-0289745 |) | | plied For at Applicable |
| Zip | Country | Zip | Country | 5 . C | ertificate of | Status Desired | | 8.75 Add | |
| | 6. Name and Address of Current R | egistered Agent | Name | 7. N | ame and Ad | idress of New R | | | . <u></u> |
| CAMALEO MENA | | | | | بعميهم دار | | | ··- · · | |
| Canales, Nelva 8449 Southwest 40th Street | | | Street Addres | ss (P.O. B | ox Number i | s Not Acceptable |) | | |
| MIAN | II FL 33155 | | | <u> </u> | _ | | | · | |
| | | | City | | | | FL | Zip Cod | e |
| SIGNATURE. 9. This corporate filing is | named entity submits this statement for the statement for the statement for the statement statement for the statement statement and elects to do so. The statement and elects to do so. The statement and elects to do so. | d title if applicable. (NOTE: Re | gistered Agent signature req FEE IS \$150.00 Fee will be \$550.0 | uired when re | instating) | on Campaign Fin Fund Contribution | DATE | | 0 May Be to Fees |
| 11. | OFFICERS AND D | | 12. | | DITIONS/CH | ANGES TO OFF | CERS AND D | IRECTOR | S IN 11 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DP CANALES, NELVA 8449 S.W. 40TH STREET MIAMI FL | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | 200 | 00046 -11/29/(****19 | 986 01010 0.00 * | 5701 | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | □ Change | ☐ Addition |
| indicated of the co | certify that the information supplied with to on this report or supplemental report is to poration or the receiver or trustee ampound or on an attachment with an address, we | true and accurate and that my s wered to execute this report as | sionature shall have t | ihe same i | egal effect a | is it made under i | oatn: that I an | n an omcer | or airector |

305-225-6365

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

ne 102 Cames 10-19-01

Mame, Od 19, 2001.

DIVISION Of Conforation Tallahusse, Ploneta 32302

Ref: Document of 579164

Sirs:

We received 2001 Uniform Business Report (UBR) but we did not send this form with the amount of one hundred and fifty dollars (150.00) before may 1/2001.

We talked per phone with somebody of this department and our inflamations are followings: The previous of the Corporation the only one shareholder was out of the country, and when she came back she did not see the form, and nobody can sign and pay the fee, until the form appeared now.

We are attaching the cleak for \$100.00 girl the form.

At the same time we inform you that this is a small Dorphotorn and we always pay on time the fee.

We appreciate in advanced if you care help us.

raspent fully yours

nelva c. Canales President.

mame . W 51.