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FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90234 003 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # S93863 (6)

1. Corporation Name
DEL TROPICO BEERS AND WINES INCORPORATED

DEL TROPICO FOOD AND BEVERAGE OF Northern Florida, INC

Principal Place of Business

Mailing Address

1460 GEMINI BLV. SUITE #9

ORLANDO FL 32837

DO NOT WRITE IN THIS SPACE

Date Incorporated or Qualified

11/13/1991

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

65-0294884

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

City & State

City & State

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

8. This corporation owns or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TAVERA, ROBERTO
12253 S.W. 16TH TERR
#104
MIAMI FL 33175

B1 Name

B2 Street Address (P.O. Box Number is NOT Acceptable)

B3

B4 City

FL

B5 Zip Code

11. Pursuant to the provisions of Sections 607.0512 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, must be printed name of registered agent and the filer if not the agent

(NOTE: Registered Agent's signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME TAVERA, ALVARO
STREET ADDRESS 6957 NW 82ND AVE
CITY-ST-ZIP MIAMI FL 33166

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

PRESIDENT
ALFONSO CORNEJO
6957 NW 82ND AVE
MIAMI, FL 33166

Change ☐ Addition ☐

TITLE V
NAME FERNANDEZ, GUILLERMO
STREET ADDRESS 6957 NW 82ND AVE
CITY-ST-ZIP MIAMI FL 33166

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

Change ☐ Addition ☐

TITLE T
NAME TAVERA, YORMARY
STREET ADDRESS 12253 SW 16 TERR., #104
CITY-ST-ZIP MIAMI FL 33175

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

GENERAL MANAGER
MIRYAN CONSUELO CORNEJO
6957 NW 82ND AVE
MIAMI, FL 33166

Change ☐ Addition ☐

TITLE S
NAME FERNANDEZ, LILIA
STREET ADDRESS 6957 NW 82ND AVENUE
CITY-ST-ZIP MIAMI FL 33166

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

Change ☐ Addition ☐

TITLE D
NAME VEGA, DELZAR F
STREET ADDRESS 6957 NW 82ND AVENUE
CITY-ST-ZIP MIAMI FL 33166

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

Change ☐ Addition ☐

TITLE D
NAME TAVERA, ROBERTO
STREET ADDRESS 12253 S.W. 16 TERR., #104
CITY-ST-ZIP MIAMI FL 33175

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

Change ☐ Addition ☐

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), 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 registered agent, and that I am not a minor, an incompetent person, or a person who has been convicted of a felony within the last 10 years.
Block 12 or Block 13 if changed or on an attachment.

SIGNATURE:

ALFONSO CORNEJO

04-30-99

(407)

4387670

SIGNATURE AND PRINTED NAME OF REGISTERED AGENT OR FILER

Date

Daytime Phone

0530425

CR2034 (10/97)