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

CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE Sanora B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

1. Corporation Name

**DOCUMENT #** V07301

(7)

RECTALIDANT	CBUILD	INTERNATIONAL	INIC

RESTA	urant group intern	ATIONAL, INC.						
Principal Place	of Business	Mailing Address					i iada dibai <b>e</b> a	711
		10205 SOUTH DIXIE ( MIAMI 33 33156	10205 SOUTH DIXIE HIGHWAY MIAMI 33 33156					
						3. Date Incorporated or Qualified 01/16/1992	1	e of Last Report <b>5/01/1995</b>
2. Principal Pla 21	ice of Business	2a. Mailing Address				4. FEI Number		Applied For
Suite, Apt. #	f, etc.	Suite, Apt. #, etc.				65-0335786	·	Not Applicable  \$8.75 Additional
22		27				5. Certificate of Status Desired		Fee Required
City & State		City & State				Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be Added to Fees
Zip	Country	Zφ	Count	try		8. This corporation has liability for i		ax under s. 199.032,
24	25 9. Name and Address of Cur	29	30				□ No	
	9. Name and Address of Cur	rent Hegistereo Agent		11	Name	10. Name and Address of New R	egistered	Agent
FEDALAN	DET ALFONOO							
FERNANDEZ, ALFONSO 10205 S. DIXIE HWY. MIAM! FL 33156			8	12	Street Addre	ess (P.O. Box Number is Not Acceptab	e)	
			8	13				
***************************************								T. T
				4	City		FL	85 Zip Code
familiar with	ed agent, or both, in the State of Fin, and accept the obligations of, S	iorida, Such change was authorizaction 607.0505, Florida Statutes	zea by the coi s.	rpo	ration's board	ation submits this statement for the purion of directors. I hereby accept the appropriate the purion of directors and the purion of the purion	ointment as	registered agent. I am
12.	OFFICERS	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFF	CERS AND	DIRECTORS IN 12
TITLE	Р	☐ DEL€TE	1. <b>1</b> TITL	ŧ		Note: A description of and		Change Addition
NAME	FERNANDEZ, ALFONSO		1.2 NAM	E				
STREET ADDRESS	10205 S. DIXIE HWY.		1.3 STRE					
CITY-ST-ZIP TITLE	MIAMI FL 33156	☐ DELETE	1.4 CHY 2 1 THL		Z0':		<del>-</del> -	7 Conner   11 Addition
NAME		[ Detect	2 2 NAM				ι	Change Addition
STREET ADDRESS			2 3 SIRE		ADDRESS			
CITY-SI-ZIP			2.4 CITY					•
TITLE		☐ DELETE	3. 1 THL				]	Change Addition
NAME			3.2 NAM	t				
STREET ADDRESS			33 STR	ff1,	ADDRESS			
CITY - \$1 - ZIP		E DOLLTO	3.4 C/TY		ZIP			
TITLE NAME		☐ DELETE	4 1 1)[[]				[	Change 🗀 Addition
STREET ADDRESS			4.2 NAMI 4.3 STHE		Valent ere			
CHTY-ST-ZIP			4.4 CITY					
TITLE		DELETE	5 1 HIL	_				Change Addition
NAME			5.2 NAM	E			`	- · -
STREET ADDRESS			53 STRE	ET A	ADDRESS			
CITY-S!-7iP			5.4 CITY	- \$1	- ZIP			
TITLE		□ DELETE	6 1 TITLI				Ī	Charige Addition
NAME			6.2 NAMI					
STREET ADDRESS			6.3 STRE					
14. Ldo hereby	certify that the information supplies	ed with this filing is valuationly fund	640 TY	-51	not qualify for	r the exemption stated in Section 119.0	17/20/04 F to	vicio Otatudos 15 utbas
certify that I	the information indicated on this a am an officer or director of the co Block 12 or Block 13 if changed,	andst repert or supplemental and oppracion or the receiver or truste	iual report is t e empowered	true	e and accurate	e and that my signature shall have the a report as required by Chapter 607, Fic	same legal.	effect as if made under

SIGNATURE: A (FOASO FERMANO 62 2/26/86

305-234-8911