


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

May 11 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **V57205** (9)  
1. Corporation Name  
**SOBE CAFE, INC.**



Principal Place of Business <b>2121 DOUGLAS RD 3RD FLOOR MIAMI FL 33145 US</b>	Mailing Address <b>2121 DOUGLAS RD 3RD FLOOR MIAMI FL 33145 US</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 350 OCEAN DRIVE Suite, Apt. #, etc. - 22 City & State 23 MIAMI BEACH FL Zip 24 33139 Country 25 U.S.A.		2a. Mailing Address 26 350 OCEAN DRIVE Suite, Apt. #, etc. - 27 City & State 28 MIAMI BEACH FL Zip 29 33139 Country 30 USA		3. Date Incorporated or Qualified <b>08/10/1992</b>	
				4. FEI Number <b>65-0377268</b>	
				5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>PEREZ, FIDEL A 2121 DOUGLAS RD 3RD FLOOR MIAMI FL 33145</b>				10. Name and Address of New Registered Agent 81 Name <b>LOURDES V. PINDER</b> 82 Street Address (P.O. Box Number is Not Acceptable) <b>350 OCEAN DRIVE</b> 83 84 City <b>MIAMI BEACH</b> FL 85 Zip Code <b>33139</b>			
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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 obligation of, Section 607.0505, Florida Statutes.

SIGNATURE *LOURDES V. PINDER* **LOURDES V. PINDER** **4/29/98**  
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P	<input checked="" type="checkbox"/> DELETE	1.1 TITLE	PIC/D	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	PEREZ, FIDEL A		1.2 NAME	ROBERTO TANAMA			
STREET ADDRESS	2121 DOUGLAS RD, 3RD FLOOR		1.3 STREET ADDRESS	8849 NW 117 STREET			
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP	HALOAH GARDENS, FL 33018			
TITLE	VTS	<input type="checkbox"/> DELETE	2.1 TITLE	S/D	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	RODRIGUEZ, ANTONIO		2.2 NAME	ANTONIO RODRIGUEZ			
STREET ADDRESS	2121 DOUGLAS RD, 3RD FLOOR		2.3 STREET ADDRESS	11440 NORTH KENDALL DR # 206			
CITY-ST-ZIP	MIAMI FL		2.4 CITY-ST-ZIP	MIAMI, FL 33176			
TITLE		<input type="checkbox"/> DELETE	3.1 TITLE	T/D	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME			3.2 NAME	LOURDES YABOR DE DIAZ			
STREET ADDRESS			3.3 STREET ADDRESS	12124 SW 131 AVE			
CITY-ST-ZIP			3.4 CITY-ST-ZIP	MIAMI, FL 33186			
TITLE		<input type="checkbox"/> DELETE	4.1 TITLE	V/D	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME			4.2 NAME	PABLO ANDRADE			
STREET ADDRESS			4.3 STREET ADDRESS	1535 NW 79 AVE			
CITY-ST-ZIP			4.4 CITY-ST-ZIP	MIAMI, FL 33126			
TITLE		<input type="checkbox"/> DELETE	5.1 TITLE	M/D	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME			5.2 NAME	LOURDES V. PINDER			
STREET ADDRESS			5.3 STREET ADDRESS	11798 SW 100 ST			
CITY-ST-ZIP			5.4 CITY-ST-ZIP	MIAMI, FL 33186			
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP			6.4 CITY-ST-ZIP				

14. 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 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 attachment with an address.

SIGNATURE: *LOURDES YABOR DE DIAZ* **LOURDES YABOR DE DIAZ** **4/29/98 (305) 256-9071**

CR2E034 (10/97)