

TX2016 05-102  
Ver. 7.0 (Rev.9-15/33)

Texas Franchise Tax Public Information Report

To be filed by Corporations, Limited Liability Companies (LLC), Limited Partnerships (LP), Professional Associations (PA) and Financial Institutions

Tcode 13196

Taxpayer number: 32042057896  
Report year: 2016

You have certain rights under Chapter 552 and 559, Government Code, to review, request and correct information we have on file about you. Contact us at 1-800-252-1381.

Taxpayer name: LATIN REAL ESTATE INC  
Mailing address: 1800 BERING STE 945  
City: HOUSTON State: TX ZIP code plus 4: 77057  
Secretary of State (SOS) file number or Comptroller file number: 0801282292

Check box if there are currently no changes from previous year; If no information is displayed, complete the applicable information in Sections A, B and C.

Principal office: 1800 BERING STE 945 HOUSTON TX 77057  
Principal place of business: 1800 BERING STE 945 HOUSTON TX 77057

You must report officer, director, member, general partner and manager information as of the date you complete this report.



Please sign below! This report must be signed to satisfy franchise tax requirements.

SECTION A Name, title and mailing address of each officer, director, member, general partner or manager.

Table with 5 rows of officer information including Name, Title, Director status, Term expiration, and Mailing address.

SECTION B Enter information for each corporation, LLC, LP, PA or financial institution, if any, in which this entity owns an interest of 10 percent or more.

Table with 2 rows for owned entities including Name, State of formation, Texas SOS file number, and Percentage of ownership.

SECTION C Enter information for each corporation, LLC, LP, PA or financial institution, if any, that owns an interest of 10 percent or more in this entity.

Table with 1 row for parent entity including Name, State of formation, Texas SOS file number, and Percentage of ownership.

Registered agent and registered office currently on file (see instructions if you need to make changes). Agent: JIM L GARCIA. Office: 1770 ST JAMES PL STE 150, Houston, TX 77056.

The information on this form is required by Section 171.203 of the Tax Code for each corporation, LLC, LP, PA or financial institution that files a Texas Franchise Tax Report. Use additional sheets for Sections A, B and C, if necessary. The information will be available for public inspection.

I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below, and that a copy of this report has been mailed to each person named in this report who is an officer, director, member, general partner or manager and who is not currently employed by this or a related corporation, LLC, LP, PA or financial institution.

Signature block: sign here, Title: SEC, Date: 01/31/2016, Area code and phone number.

Texas Comptroller Official Use Only

VE/DE, PIR IND checkboxes



TX2015 05-102  
Ver. 6.0 (Rev.9-13/32)

### Texas Franchise Tax Public Information Report

To be filed by Corporations, Limited Liability Companies (LLC) and Financial Institutions  
This report MUST be signed and filed to satisfy franchise tax requirements

Tcode 13196

Taxpayer number <b>32042057896</b>		Report year <b>2015</b>		You have certain rights under Chapter 552 and 559, Government Code, to review, request and correct information we have on file about you. Contact us at 1-800-252-1381.	
Taxpayer name <b>LATIN REAL ESTATE INC</b>				<input type="checkbox"/> Check box if the mailing address has changed.	
Mailing address <b>1800 BERING STE 945</b>				Secretary of State (SOS) file number or Comptroller file number <b>0801282292</b>	
City <b>HOUSTON</b>	State <b>TX</b>	ZIP Code <b>77057</b>	Plus 4		

Check box if there are currently no changes from previous year; if no information is displayed, complete the applicable information in Sections A, B and C.

Principal office <b>1800 BERING STE 945 HOUSTON TX 77057</b>
Principal place of business <b>1800 BERING STE 945 HOUSTON TX 77057</b>

**Please sign below!**

Officer, director and manager information is reported as of the date a Public Information Report is completed. The information is updated annually as part of the franchise tax report. There is no requirement or procedure for supplementing the information as officers, directors, or managers change throughout the year.



**SECTION A** Name, title and mailing address of each officer, director or manager.

Name	Title	Director	Term expiration	State	ZIP Code
ALFREDO CHEDRAUI OBESO	PRESIDENT	<input type="checkbox"/> YES	1 2 3 1 1 6	TX	77057
Mailing address 1800 BERING STE 945	City Houston				
ANTONIO CHEDRAUI OBESO	VPRES TRE	<input type="checkbox"/> YES	1 2 3 1 1 6	TX	77057
Mailing address 1800 BERING STE 945	City Houston				
ALAN SHELBY	SEC	<input type="checkbox"/> YES	1 2 3 1 1 6	TX	77057
Mailing address 1800 BERING STE 945	City Houston				

**SECTION B** Enter the information required for each corporation or LLC, if any, in which this entity owns an interest of 10 percent or more.

Name of owned (subsidiary) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of ownership

**SECTION C** Enter the information required for each corporation or LLC, if any, that owns an interest of 10 percent or more in this entity or limited liability company.

Name of owned (parent) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of ownership

Registered agent and registered office currently on file (see instructions if you need to make changes)				<input type="checkbox"/> Check box if you need forms to change the registered agent or registered office information.	
Agent: <b>JIM L GARCIA</b>					
Office: <b>1770 ST JAMES PL STE 150</b>	City <b>Houston</b>	State <b>TX</b>	ZIP Code <b>77056</b>		

The above information is required by Section 171.203 of the Tax Code for each corporation or limited liability company that files a Texas Franchise Tax Report. Use additional sheets for Sections A, B, and C, if necessary. The information will be available for public inspection.

I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below, and that a copy of this report has been mailed to each person named in this report who is an officer, director or manager and who is not currently employed by this, or a related, corporation or limited liability company.

sign here	Title <b>SEC</b>	Date <b>01/31/2015</b>	Area code and phone number <b>(713) 974-1777</b>
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Texas Comptroller Official Use Only

VE/DE <input type="checkbox"/>	PIR IND <input type="checkbox"/>
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TX2014 05-102  
Ver. 5.0 (Rev.9-13/32)

**Texas Franchise Tax Public Information Report**  
To be filed by Corporations, Limited Liability Companies (LLC) and Financial Institutions  
This report MUST be signed and filed to satisfy franchise tax requirements

■ Tcode 13196

■ Taxpayer number 32042057896		■ Report year 2014		You have certain rights under Chapter 552 and 559, Government Code, to review, request and correct information we have on file about you. Contact us at 1-800-252-1381.	
Taxpayer name LATIN REAL ESTATE INC				<input type="checkbox"/> Check box if the mailing address has changed.	
Mailing address 1800 BERING STE 945				Secretary of State (SOS) file number or Comptroller file number	
City HOUSTON	State TX	ZIP Code 77057	Plus 4	0801282292	

Check box if there are currently no changes from previous year; if no information is displayed, complete the applicable information in Sections A, B and C.

Principal office 1800 BERING STE 945 HOUSTON TX 77057
Principal place of business 1800 BERING STE 945 HOUSTON TX 77057



**Please sign below!**

Officer, director and manager information is reported as of the date a Public Information Report is completed. The information is updated annually as part of the franchise tax report. There is no requirement or procedure for supplementing the information as officers, directors, or managers change throughout the year.

**SECTION A Name, title and mailing address of each officer, director or manager.**

Name ALFREDO CHEDRAUI OBESO	Title PRESIDENT	Director <input type="checkbox"/> YES	Term expiration m m d d y y 1 2 3 1 1 6
Mailing address 1800 BERING STE 945	City Houston	State TX	ZIP Code 77057
Name ANTONIO CHEDRAUI OBESO	Title VPRES TRE	Director <input type="checkbox"/> YES	Term expiration m m d d y y 1 2 3 1 1 6
Mailing address 1800 BERING STE 945	City Houston	State TX	ZIP Code 77057
Name ALAN SHELBY	Title SEC	Director <input type="checkbox"/> YES	Term expiration m m d d y y 1 2 3 1 1 6
Mailing address 1800 BERING STE 945	City Houston	State TX	ZIP Code 77057

**SECTION B** Enter the information required for each corporation or LLC, if any, in which this entity owns an interest of 10 percent or more.

Name of owned (subsidiary) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of ownership
Name of owned (subsidiary) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of ownership

**SECTION C** Enter the information required for each corporation or LLC, if any, that owns an interest of 10 percent or more in this entity or limited liability company.

Name of owned (parent) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of ownership
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Registered agent and registered office currently on file (see instructions if you need to make changes)				<input type="checkbox"/> Check box if you need forms to change the registered agent or registered office information.	
Agent: JIM L GARCIA		City: Houston		State: TX	ZIP Code: 77056
Office: 1770 ST JAMES PL STE 150					

The above information is required by Section 171.203 of the Tax Code for each corporation or limited liability company that files a Texas Franchise Tax Report. Use additional sheets for Sections A, B, and C, if necessary. The information will be available for public inspection.

I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below, and that a copy of this report has been mailed to each person named in this report who is an officer, director or manager and who is not currently employed by this, or a related, corporation or limited liability company.			
sign here <i>Alan Shelby</i>	Title SEC	Date 02/10/2014	Area code and phone number (713) 975-2825

Texas Comptroller Official Use Only

VE/DE <input type="checkbox"/>	PIR IND <input type="checkbox"/>
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TX2013

Ver. 4.0 05-102 (Rev.9-11/30)

Tcode 13196

Texas Franchise Tax Public Information Report

To be filed by Corporations, Limited Liability Companies (LLC) and Financial Institutions. This report MUST be signed and filed to satisfy franchise tax requirements

Taxpayer number 32042057896, Report year 2013. You have certain rights under Chapter 552 and 559, Government Code, to review, request, and correct information we have on file about you.

Taxpayer name LATIN REAL ESTATE, INC., Mailing address 1800 BERING STE 945, City HOUSTON, State TX, ZIP Code 77057, Plus 4, Secretary of State (SOS) file number or Comptroller file number 0801282292

Check box if there are currently no changes from previous year; if no information is displayed, complete the applicable information in Sections A, B and C.

Principal office 1800 BERING STE 945, HOUSTON, TX 77057, Principal place of business 1800 BERING STE 945, HOUSTON, TX 77057



3204205789613

Please sign below! Officer, director and member information is reported as of the date a Public Information Report is completed. The information is updated annually as part of the franchise tax report.

SECTION A Name, title and mailing address of each officer, director or member.

Table with 4 columns: Name, Title, Director (YES/NO), Term expiration (MMDDYY). Rows include Alfredo Chedraui Obeso (President), Antonio Chedraui Obeso (V/PRES-TRE), and Alan Shelby (SEC).

SECTION B Enter the information required for each corporation or LLC, if any, in which this entity owns an interest of 10 percent or more.

Table with 4 columns: Name of owned (subsidiary) corporation or limited liability company, State of formation, Texas SOS file number, if any, Percentage of ownership.

SECTION C Enter the information required for each corporation or LLC, if any, that owns an interest of 10 percent or more in this entity or limited liability company.

Table with 4 columns: Name of owned (parent) corporation or limited liability company, State of formation, Texas SOS file number, if any, Percentage of ownership.

Registered agent and registered office currently on file. (see instructions if you need to make changes) Agent: JIM L. GARCIA, Office: 1770 ST JAMES PLACE STE 150, City HOUSTON, State TX, ZIP Code 77056

The above information is required by Section 171.203 of the Tax Code for each corporation or limited liability company that files a Texas Franchise Tax Report. Use additional sheets for Sections A, B, and C, if necessary. The information will be available for public inspection.

I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below, and that a copy of this report has been mailed to each person named in this report who is an officer, director or member and who is not currently employed by this, or a related, corporation or limited liability company.

Sign here: Alan Shelby, Title: SEC, Date: 3/8/13, Area code and phone number: 713 975 2825

Texas Comptroller Official Use Only

VE/DE, PIR IND, and other checkboxes for official use.



120593013005

TX2012

Ver. 3.0 05-102 (Rev.9-11/30)

Texas Franchise Tax Public Information Report

To be filed by Corporations, Limited Liability Companies (LLC) and Financial Institutions

This report MUST be signed and filed to satisfy franchise tax requirements

Tcode 13196

Taxpayer number

32042057896

Report year

2012

You have certain rights under Chapter 552 and 559, Government Code, to review, request, and correct information we have on file about you. Contact us at (800) 252-1381 or (512) 463-4600.

Taxpayer name

LATIN REAL ESTATE, INC.

Mailing address

1800 BERING STE 945

City

HOUSTON

State TX

ZIP Code 77057

Plus 4

Secretary of State (SOS) file number or Comptroller file number

0801282292

Check box if there are currently no changes from previous year; if no information is displayed, complete the applicable information in Sections A, B and C.

Principal office

1800 BERING STE 945, HOUSTON, TX 77057

Principal place of business

1800 BERING STE 945, HOUSTON, TX 77057

Please sign below!

Officer, director and member information is reported as of the date a Public Information Report is completed. The information is updated annually as part of the franchise tax report. There is no requirement or procedure for supplementing the information as officers, directors, or members change throughout the year.



3204205789612

SECTION A Name, title and mailing address of each officer, director or member.

Table with 4 columns: Name, Mailing address, Title, and Director information (Term expiration, State, ZIP Code). Includes entries for Alfredo Chedraui Obeso, Antonio Chedraui Obeso, and Alan Shelby.

SECTION B Enter the information required for each corporation or LLC, if any, in which this entity owns an interest of 10 percent or more.

Table with 4 columns: Name of owned (subsidiary) corporation or limited liability company, State of formation, Texas SOS file number, if any, and Percentage of ownership.

SECTION C Enter the information required for each corporation or LLC, if any, that owns an interest of 10 percent or more in this entity or limited liability company.

Table with 4 columns: Name of owned (parent) corporation or limited liability company, State of formation, Texas SOS file number, if any, and Percentage of ownership.

Registered agent and registered office currently on file. (see instructions if you need to make changes)

Agent: JIM L. GARCIA

Check box if you need forms to change the registered agent or registered office information.

Table with 4 columns: Office, City, State, and ZIP Code. Office: 1770 ST JAMES PLACE STE 150, City: HOUSTON, State: TX, ZIP Code: 77056

The above information is required by Section 171.203 of the Tax Code for each corporation or limited liability company that files a Texas Franchise Tax Report. Use additional sheets for Sections A, B, and C, if necessary. The information will be available for public inspection.

I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below, and that a copy of this report has been mailed to each person named in this report who is an officer, director or member and who is not currently employed by this, or a related, corporation or limited liability company.

sign here - Signature: Alaswell, Title: Sec, Date: 2/21/12, Area code and phone number: 713 975 2825

Texas Comptroller Official Use Only

VE/DE [ ] PIR IND [ ]



TX2011

Ver. 2.0 05-102 (9-09/29)

TEXAS FRANCHISE TAX PUBLIC INFORMATION REPORT

To be filed by Corporations, Limited Liability Companies (LLCS) and Financial Institutions

This report MUST be signed and filed to satisfy franchise tax requirements

Tcode 13196

Taxpayer number

Report year

You have certain rights under Chapter 552 and 559, Government Code, to review, request, and correct information we have on file about you. Contact us at: (512) 463-4600, or (800) 252-1381, toll free nationwide.

32042057896

2011

Taxpayer name: LATIN REAL ESTATE, INC.

Mailing address: 1800 BERING STE 945

City: HOUSTON

State: TX

ZIP Code: 77057

Plus 4

Secretary of State file number or Comptroller file number

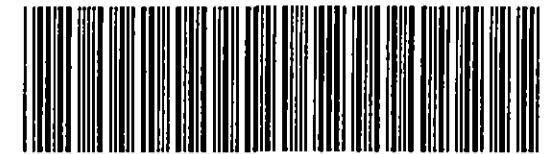
0801282292

Check box if there are currently no changes from previous year; if no information is displayed, complete the applicable information in Sections A, B and C.

Principal office: SAME AS ABOVE

Principal place of business: SAME AS ABOVE

Please sign below! Officer, director, and member information is reported as of the date a Public Information Report is completed. The information is updated annually as part of the franchise tax report. There is no requirement or procedure for supplementing the information as officers, directors, or members change throughout the year.



3204205789611

SECTION A Name, title and mailing address of each officer, director or member.

Name: ALFREDO CHEDRAUI OBESO, Title: PRESIDENT, Mailing address: 1800 BERING DRIVE STE 945, City: HOUSTON

Director: [X] Yes, Term expiration: 123111, State: TX, ZIP Code: 77057

Name: ANTONIO CHEDRAUI OBESO, Title: V/PRES-TRE, Mailing address: 1800 BERING STE 945, City: HOUSTON

Director: [X] Yes, Term expiration: 123111, State: TX, ZIP Code: 77057

Name: ALAN SHELBY, Title: SEC, Mailing address: 1800 BERING STE 945, City: HOUSTON

Director: [ ] Yes, Term expiration: 123111, State: TX, ZIP Code: 77057

SECTION B Enter the information required for each corporation or LLC, if any, in which this entity owns an interest of ten percent (10%) or more.

Name of owned (subsidiary) corporation or limited liability company: None, State of formation, Texas SOS file number, if any, Percentage of Ownership

SECTION C Enter the information required for each corporation or LLC, if any, that owns an interest of ten percent (10%) or more in this entity or limited liability company.

Name of owned (parent) corporation or limited liability company: None, State of formation, Texas SOS file number, if any, Percentage of Ownership

Registered agent and registered office currently on file. (See instructions if you need to make changes)

Agent: JIM L. GARCIA

Check box if you need forms to change the registered agent or registered office information.

Office: 1770 ST JAMES PLACE STE 150

City: HOUSTON

State: TX

ZIP Code: 77056

The above information is required by Section 171.203 of the Tax Code for each corporation or limited liability company that files a Texas Franchise Tax Report. Use additional sheets for Sections A, B, and C, if necessary. The information will be available for public inspection.

I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below, and that a copy of this report has been mailed to each person named in this report who is an officer, director or member and who is not currently employed by this, or a related, corporation or limited liability company.

sign here: Alan Shelby

Title: Sec

Date: 2/21/11

Area code and phone number: 713 975 2825

Texas Comptroller Official Use Only

VE/DE [ ] PIR IND [ ]

