

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

PROFIT CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # **193239**

(1)

1. Corporation Name

**A G FOOD STORES INC**



Principal Place of Business

7000 N.W. 32ND AVENUE  
PO BOX 520695  
MIAMI FL 33152

Mailing Address

7000 N.W. 32ND AVENUE  
PO BOX 520695  
MIAMI FL 33152

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified  
**05/18/1956**

3a. Date of Last Report  
**03/13/1995**

4. FET Number  
**65-0036581**

Applied For  
Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution



**\$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

**CALVIN, MILLER J  
7000 NW 32ND AVE.  
MIAMI FL 33147**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Numbers Not Acceptable)

83

84 City

**FL**

85 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

12. OFFICERS AND DIRECTORS

12. TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

**P**  DELETE  
**CALVIN, MILLER J**  
**7000 N.W. 32ND AVENUE**  
**MIAMI FL**  
**S**  DELETE  
**LEWIS, THOMAS C**  
**7000 N.W. 32ND AVE.**  
**MIAMI FL**  
**D**  DELETE  
**HARRIS, ERNEST**  
**6430 SW 120TH ST**  
**MIAMI FL**  
**T**  DELETE  
**LEWIS, THOMAS C**  
**7000 N.W. 32ND AVENUE**  
**MIAMI FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13. TITLE  
13. NAME  
13. STREET ADDRESS  
13. CITY-STATE-ZIP  
14. TITLE  
14. NAME  
14. STREET ADDRESS  
14. CITY-STATE-ZIP  
15. TITLE  
15. NAME  
15. STREET ADDRESS  
15. CITY-STATE-ZIP  
16. TITLE  
16. NAME  
16. STREET ADDRESS  
16. CITY-STATE-ZIP

Change  Addition  
 Change  Addition  
 Change  Addition  
 Change  Addition  
 Change  Addition  
 Change  Addition

14. I do, I hereby certify that the information furnished on this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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. 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:

*Thomas C Lewis*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/3/96

CR2E034 (12/95)