2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 04, 2004 8:00 am
Secretary of State
02-04-2004 90056 028 ***150.00

DOCUMENT # 276772

1. Entity Name

TOM THUMB FOOD STORES, INC.

Principal Place of Business	Mailing Address
97 WEST OKEECHOBEE RD. HIALEAH FL 33010 US	97 WEST OKEECHOBEE RD. HIALEAH FL 33010 US

MOORE CR2E034 (11/03)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-1034928 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MCCARTHY, JAMES A., JR. 97 W. OKEECHOBEE ROAD HIALEAH FL 33010	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PTD MCCARTHY, JAMES A JR 13004 SAN JOSE STREET CORAL GABLES FL 33156	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VSD MCCARTHY, SANDRA 13004 SAN JOSE STREET CORAL GABLES FL	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BENNION, THOMAS O. 2 LAKESHORE DRIVE YALAHA FL 34797	☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 7273 Chesterhill Circle Mt. Dora, Florida 32757
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MEZYK, CHARLENE 13321 SW 16 CT. DAVIE FL	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MCCARTHY, JAMES A III 10651 SW 108TH AVE UNIT 2-C MIAMI FL 33176	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MCCARTHY, THOMAS P 955 NE 92ND ST MIAMI SHORES FL 33138	☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 439 N.E. 92nd Street Miami Shores, Florida 33138

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: James A. McCarthy, Jr., President 1/26/04 305-885-5451
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #