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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1999
DOCUMENT # 405443
1. Corporation Name

QUICK STOP FOOD STORES, INC.

## FILED Feb 02, 1999 8:00am Secretary of State

02-02-1999 90010 029 \*\*\*150.00



. *						-
Principal Place of	Business	Mailing Address				
8604 SOUTH TAMIAMI TRAIL SARASOTA FL 34238		8604 SOUTH TAMIAMI TRAIL SARASOTA FL 34238				
				DO NOT WRITE IN THIS SPACE		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				3. Date incorporated or Qualifed		ļ
-	•			07/24/1972		
				4. FEI Number	Applied	For
2. Principal Plac	e of Business	2a. Mailing Address		59-1412419	Not Ap	plicable
	- · · · ·	26			\$8.75 Addit	tional
1	oto	Suite, Apt. #, etc.		5. Certifcate of Status Desired	Fee Requir	ed _
Suite, Apt. #,	eic.	27			\$5.00 May	v Be
2		City & State		6. Election Campaign Financing	Added to F	- 1
City & State	•	28		Trust Fund Contribution		
23	Country	Zip	Country	8. This corporation owes the current y	year intangible ⊠Yes □	No
Zip	Country	29 30	·	Personal Property Tax.	44.44	
24	25	[49]		10. Name and Address of New Regis	Stered Agent	
	9. Name and Address of Current	Kegistered Agont	81 Name			
			<u> </u>	ress (P.O. Box Number is Not Acceptable)	),	
MESS	INA, VINCENT J. JR		82 Street Add	in a la la companya de la companya d	24. 3 4.4 4.4 4.4 4.4 4.4 4.4 4.4	Charles 1902
	SOUTH TAMIAMI TRAIL		83	1897 - \$11 (1) \$ 11 (1) \$ 120 1	1888年1981年 188	
SARA	SOTA, FLORIDA		63	· 福州· 福州· 阿里里拉克斯		1 1916 1541
34238			84 City		FL 85 Zip Coo	
	•		1 1	poration submits this statement for the pur tion's board of directors. I hereby accept th		gistered
ACOM OF THE TA	17.11 007.0503	and 607 1508 Florida Statutes	, the above-named cor	poration submits this statement for the pur tion's board of directors. I hereby accept th	ne appointment as regis	tered
	the provisions of Sections 607.0302	of Florida. Such change was aut	horized by the corporat	IDIT'S DOZIG OF GIRCOGUST THE TY		ļ
11. Pursuant to						
office or re	gistered agent, or toom, in the obligat familiar with, and accept the obligat	ions of, Section 607.0505, Florid	ia Statutes.			
agent. I am	familiar with, and accept the obligat				DATE	
agent. I am	familiar with, and accept the obligation	t and title if applicable. (NOTE: F	Registered Agent signature requi		DATE CERS AND DIRECTORS	S IN 12
agent, I am	familiar with, and accept the obligation	t and title if applicable. (NOTE: F	tegistered Agent signature requi	ADDITIONS/CHANGES TO OFFIC	DATE	
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I hereby certify that the information supplied with this fling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information supplemental annual report of 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 indicated on this annual report of 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 indicated on this annual report of 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 indicated on this annual report of supplemental annual report of the corporation of the receive of trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in officer or director of the corporation or the receive of trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in officer or director of the corporation or the receive of trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in officer or director of the corporation of the receive of trustee empowered.

Block 12 or Block 13 if changed, or an attact ment with an address, with all other like empowered.

SIGNATURE: 15 TO THE OF SIGNING OFFICER OR DIRECT

Date Dayime Phone #