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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

L94789

(9)

JAY FOOD STORES INC.

Principal Place of Business	Mailing Address

2540 E MAIN ST LAKELAND FL 33801 2540 E MAIN ST

FILED Mar 26 1998 8:00am Secretary of State



Supplied in panel.			DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qualified		
					08/20/1990		
2. Principal Pl	ace of Business	2s. Mailing Address			4. FEI Number	Applied For	
21		26			59-3021618	Not Applicable	
Suite, Apt. i	#, etc.	Suite, Apt. #, etc	3 .	,	5. Certificate of Status Desired	\$8.75 Additional	
27				B. Certificate of Status Desired	Fee Required		
City & State	1	City & State			6. Election Campaign Financing	\$5.00 May Be	
23		28			Trust Fund Contribution	Added to Fees	
Zip	Country	Ζιp	Cor	ıntry	B. This corporation owes or has paid the cu		
24	25	29	30		, bicariant topon, tall and carry	Yes No	
	g. Name and Address of Current	t Registered Agent			10. Name and Address of New Registered	Agent	
	NH, JANAK			81 Name			
111	7 HUNT AVE			82 Street Address (P.O. Box Number is Not Acceptable)			
	ELAND 33801						
				83			
				84 City		85 Zip Code	
					FL.	. 2.5 0000	
11. Pursuant t	o the provisions of Sections 607.0502	2 and 607.1508, Florida 9	Statutes, the a	bove-named	corporation submits this statement for the purpose operation's board of directors. I hereby accept the appropriate the statement for the purpose of the statement for the s	f changing its registered	
office of re	egistered agent, or both, in the State in familiar with, and accept the obligation	or Fiorida. Such change ations of, Section 607.050	was authorize 05. Florida Sta	a by the corp lutes.	poration's board or directors. I hereby accept the app	pointment as registered	
SIGNATURE			•				
SIGNATORE	Signature, typed or printed name of registered ager	nt and title if applicable	(NOTE Registere	d Agent signature	required when reinstating) DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	PD	DELET	E 1,110	TLE	VS7	Change Addition	
NAME	Parikh, gokul j	/	1.2 N	AME	ARUN SHATI		
STREET ADDRESS	118 JAMES AVE		1.3 S	TREET ADDRESS	1117 HUNT AVE		
CITY-ST-ZIP	CRANFORD NJ		1.4 C	ITY-ST-ZIP	1117 HUNT AVE LAKEZAND, EL. PRESIDENT SHAH, JANAK		
TITLE	VST	☐ DELET	E 2.1 To	TLE	PRESIDENT	Change	
NAME	SHAH, JANAK P		2.2 N	AME	TANAN		
STREET ADDRESS	1117 HUNT AVE		2.3 \$	TREET ADDRESS	SHAH) JANAA		
CITY-ST-ZIP	LAKELAND FL		2.40	CITY-ST-ZIP	.9. ~		
TITLE	D	☐ DELET	E 3.1 TI	TLE		☐ Change ☐ Addition	
NAME	SHAH, JANAK P		3.2 N	AME			
STREET ADDRESS	1117 HUNT AVE		3.3 S	TREET ADDRESS			
CITY-ST-ZIP	LAKELAND FL		3.4. 0	CITY-ST-ZIP			
TITLE		DELET	E 4.1 To	TLE		☐ Change ☐ Addition	
NAME			4. 2 N	IAME .			
STREET ADDRESS			4.3 S	TREET ADDRESS			
CITY-ST-ZIP			4.4 0	ITY-ST-ZIP			
TITLE		DELET				☐ Change ☐ Addition	
NAME			5.2 N	AME			
STREET ADDRESS				TREET ADDRESS			
CITY-ST-ZIP			4	ITY-ST-ZIP			
TITLE		DELET				☐ Change ☐ Addition	
NAME			6.2 N				
STREET ADDRESS				TREET ADDRESS			
1				ITY-ST-ZIP			
CITY-ST-ZIP			■ 64 C	01-SL-7P			

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 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:

3.23.98 (941) 667.1616