FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 17 AM 11:44

DOCUMENT # **M20216** **(1)**

1. Corporation Name
7400 SUPERMARKET, INC.

Principal Place of Business
7400 SW 8 ST.
MIAMI FL 33144

Mailing Address
7400 SW 8 ST.
MIAMI FL 33144

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/04/1985
3a. Date of Last Report: 03/14/1994

2. Principal Place of Business — 21
Suite Apt # etc. — 22
City & State — 23
Zip — 24 Country — 25

2a. Mailing Address — 26
Suite Apt # etc. — 27
City & State — 28
Zip — 29 Country — 30

4. FEI Number: 59-2587880 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ — $6.75 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
LATA, ANDRES
1734 S.W. 100 AVENUE
MIAMI FL 33165

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 85 Zip Code

11. Pursuant to the provisions of Sections 607.0505 and 607.1608, Florida Statutes, the above named corporation submits the 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

TITLE	PD
NAME	ANDRES, LATA
STREET ADDRESS	3351 SW 110TH CT.
CITY, ST, ZIP	MIAMI FL
TITLE	STD
NAME	MIQUEO, MARIA
STREET ADDRESS	1734 S.W. 100 AVE.
CITY, ST, ZIP	MIAMI FL

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 1.

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
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CITY, ST, ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

14. I hereby certify that the information supplied with this filing, and accompanying documents, has been examined by me and is, to the best of my knowledge and belief, true and accurate. I further certify that this document is filed for the purpose of filing a corporation annual report or supplemental annual report in compliance with Chapter 607, Florida Statutes. I further certify that I am familiar with the provisions of, and the obligations imposed by or pursuant to, Chapter 607, Florida Statutes, and that my name appears in Block 12. or Block 13. of this report or an attachment with an address.

SIGNATURE: Andrés Latas — 1/9/95 — 2662657
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0160320 CP