2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 22, 2006 08:00 Al Secretary of State

. Daytime Phone #

DOCUMENT # P01000110516 1. Entity Name MIAMI GROCERS, INC.				Secretary of State			
Principal Plac 5299 NE 2N MIAMI, FL 3		Mailing Address 5299 NE 2ND AVENUE MIAMI, FL 33137					
DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent				03072006 No Chg-P CR2E034 (11/05) 4. FEI Number			or
11200 PIN SUITE 200 PEMBRON	ODALYS M P.A. ES BLVD) (E PINES, FL 33026		IN .	NOT WRI	E		
8. The above the obligat SIGNATURE	named entity submits this statement for thins of registered agent. Signature, typed or printed name of registered agent and		ed office or register	<u> </u>	* <u>*</u> *	am familiar with, and acc	cept
FILE NOWIII FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Finar Trust Fund Contribution.				.00 May Be ed to Fees	U00000477 04/06/06-800	'354 148-024 150.00)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DII PSD SEPULVEDA, RAMON 5299 NE 2ND AVENUE MIAMI, FL 33137	RECTORS		· ·	- - : .,		
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NAME STREET ADDRESS CITY-ST-ZIP					THIS SPAC		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						Market Street Street	
12. I hereby indicated of the corchanged	certify that the information supplied with the on this report or supplemental report is tru poration or the receiver or trustee empower or on an attachment with an address, with	is filing does not qualify for the ex se and accurate and that my signs are to execute this report as requ n gir other like empowered.	emptions contained ture shall have the s fred by Chapter 607	f in Chapter 11 same legal effe 7, Florida Statut	Florida Statutes, I further ct as if made under oath; tr es; and that my name appe	certify that the informati at I am an officer or direc ars in Block 10 or Block	ion ctor 11 if

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: