

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90769 005 ***150.00

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DOCUMENT # **P01000117634**

1. Entity Name
GARDNER'S SUPER MARKETS, INC. NO. 14



Principal Place of Business
**3117 BIRD AVE.
MIAMI FL 33133**

Mailing Address
**9351 SW 56TH ST.
MIAMI FL 33165**



2. Principal Place of Business

3. Mailing Address

C/O Ploucha, L.M. Esq.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1946 Tyler Street

City & State

Hollywood FL

4. FEI Number **02-0540701**

Applied For
Not Applicable

Zip Country

33020-4517 U.S.

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

CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PLOUCHA, L M ESQ
1946 TYLER STREET
HOLLYWOOD FL 33020-4517**

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 **Maurice D. Adams**

2/24/03

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, 2003 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 **D** Delete
NAME **GARDNER, JOSEPH T**
STREET ADDRESS **9351 SW 56TH ST.**
CITY-ST-ZIP **MIAMI FL 33165**

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **DP** Delete
NAME **ADAMS, MAURICE D**
STREET ADDRESS **9351 SW 56TH ST.**
CITY-ST-ZIP **MIAMI FL 33165**

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **DVST** Delete
NAME **ADAMS, ELIZABETH G**
STREET ADDRESS **9351 SW 56TH ST.**
CITY-ST-ZIP **MIAMI FL 33165**

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** Delete
NAME **SCHWARTZ, LOUISE G**
STREET ADDRESS **9351 SW 56TH ST.**
CITY-ST-ZIP **MIAMI FL 33165**

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 multiple annual reports 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: **Maurice D. Adams**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/24/03
Date

305 667-9003
Daytime Phone #

CR2E034 (10/02)