

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000099437

Entity Name: STRAWBERRY GROCERY INC.

Current Principal Place of Business:

516 S. MARYLAND AVE.
PLANT CITY, FL 33563

Current Mailing Address:

516 S. MARYLAND AVE.
PLANT CITY, FL 33563 US

FEI Number: 27-4199951

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GILANI, NABAD A
516 S. MARYLAND AVE.
PLANT CITY, FL 33563 US

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title P
Name GILANI, NABAD
Address 516 S. MARYLAND AVE.
City-State-Zip: PLANT CITY FL 33563

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: NABAD GILANI

P

04/24/2015

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date