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 # 255790

(8)

BLESSING'S MARKET, INC.

I INGIA HARI SHARI SHARI SHARI SHAK BAK RIBH AKAK ALBK ALAH ALAH ALAH ALAH A

FILED

Apr 23 1998 8:00am

Secretary of State

Principal Place of Business Mailing Address				d Looring timbs drives divin 10010 10110 daft 31811 f	
275 WEST RIVER RD PALATKA FL 32177 US		RT 2 BOX 1204 PALATKA FL 32177 US		DO NOT WRITE IN TH	IIS SPACE
				3. Date Incorporated or Qualified	
9 Principal I	Place of Business	2a, Mailing Address		02/08/1962 4. FEI Number	A
21	TIMES OF ECONOSIS	26		59-0971406	Applied For Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City&iSta	ite	Cily & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zφ	Country	a. This corporation owes or has paid the	
24	25 a. Name and Address of Cu	rrent Registered Agent	30	Personal Property Tax due June 30. 10. Name and Address of New Registers	Yes No
RI	ESSING, ALAN D	Tropiciorea rigori	81 Name	(U. Mario and Address of New Hogiston	on Afford
RT 2 BOX 1204			20 0	1. In the second of the second	
PALATKA FL 32177			82 Street A	Address (P.O. Box Number is Not Acceptable)	
	•		83		
			84 City		. 85 Zip Code
				F	L S Zip Code
Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, the above-named corporation submits this 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and other printed that the purpose of changing its registered agent signature required when reinstating). DATE					
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PV	DELETE	1.1 TITLE	ADDITIONO/OFFININGED TO OFFIDERIO?	Change Addition
NAME	B LESSING, ALAN D		1.2 NAME		}
STREET ADDRESS	RT. 2, BOX 1204		1.3 STREET ADDRESS		
CITY-ST-ZIP	PALATKA FL 32177	w	14 CITY-ST-ZIP		
TITLE	BI ECCINIC MIDITUA	☐ DELETE	21 TITLE		Change Addition
NAME	BLESSING, JUDITH A RT. 2, BOX 1204		2.2 NAME		
STREET ADDRESS	PALAKTA FL 32177		2.3 STREET ADDRESS	· ·	
CITY-ST-ZIP TITLE	D	DELETE	2. 4 City-St-ZiP 3.1 Title		Change Addition
NAME	WEBB, DAVID SR.		3.2 NAME		C. Quantite C. Modulan
STREET ADDRESS	904 DOLPHIN DR		3.3 STREET ADDRESS	1	
CITY-ST-ZIP	JUPITER FL 33458		3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE	:	☐ DELETE	5.1 TITLE	·	Change Addition
NAME			5.2 NAME		
STREET ADORESS			5.3 STREET ADDRESS		
CITY-ST-ZIP	<u> </u>	DFLETE	5.4 CITY-ST-ZIP		Change L 44491-
TITLE NAME		בן טוננונ	6.1 TITLE		Change Addition
STREET ADDRESS			6.2 NAME 6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
44 I herehv	certify that the information supplie	d with this filing does not qualify fo	r the exemption states	d in Section 119.07(3)(i), Florida Statutes. I further	certify that the information
indicated on this annual report or supplemental 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 Statules; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.					