


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005 08:00 AM
Secretary of State

DOCUMENT # 352606
 1. Entity Name
GEORGE'S MARKET, INC.



Principal Place of Business 4611 HAINES ROAD SAINT PETERSBURG, FL 33714	Mailing Address 4611 HAINES ROAD SAINT PETERSBURG, FL 33714
---	---

DO NOT WRITE IN THIS SPACE



03212005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1283402	Applied For Not Applicable
-----------------------------	-------------------------------

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

6. Name and Address of Current Registered Agent
 MEVOLI, N. LAWRENCE JR
 4611 HAINES ROAD
 ST. PETERSBURG, FL 33714

DO NOT WRITE IN THIS SPACE

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 *N. Lawrence Jr* DATE 4/26/05
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MEVOLI, MARY P 4611 HAINES RD N ST PETERSBURG, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MEVOLI, N. LAWRENCE 4611 HAINES ROAD ST. PETERSBURG, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MEVOLI, N. LAWRENCE 4611 HAINES RD N ST PETERSBURG, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

00000549648
 04/29/05-80104-020 150.00

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 supplemental 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 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: *N. Lawrence Jr* DATE 4/26/05 DAYTIME PHONE # 525-4600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR