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 # 376020

(4)

FILED Apr 15 1998 8:00am Secretary of State

SOUTH	MIAMI MARKET, INC.						 1 1 1 1 1 1 1 1 1 1
Principal Plac	ce of Business	Mailing Address					
5950 S W 68TH ST 5950 S W 68TH ST SOUTH MIAMI FL 33143 SOUTH MIAMI FL 33143							
					DO NOT WRITE IN THIS	SPACE	
					3. Date Incorporated or Qualified		
2. Principal F	Place of Business	2a. Mailing Address			01/22/1971 4. FEI Number	- ΙΔ,	oplied For
21	Table of Educations	26			59-1313059	-	ot Applicable
		Suite, Apt. #, etc.), Apt. #, etc.				Additional
22		27			5. Certificate of Status Desired	•	equired
City & State		City & State			6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution		to Fees
Zip	Country	Ζφ	Count	ry	8. This corporation owes or has paid the c	urrent year In	tangible
24	25	29	30		Personal Property Tax due June 30.		No
	9. Name and Address of Current	Registered Agent		-T	10. Name and Address of New Registered	l Agent	
	RSOUR, ISSAM		8	1 Name			
5950 SW 68TH STREET			8	2 Street Add	ress (P.O. Box Number is Not Acceptable)		
SO	UTH MIAMI FL 33143		-				
			8	3			
			В	4 City	F-1	85 Zip	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes,					F		to reciptored
office or	registered agent, or both, in the State of	of Florida. Such change was a	authorized b	by the corpora	tion's board of directors. I hereby accept the ap	pointment as	registered
agent. I a	am familiar with, and accept the obliga	tions of, Section 607.05 0 5, Flo	orida Statuti	es.			1
SIGNATURE	Signature, typed or printed name of registered agree	c and title if applicable (NO)	E: Registered A	aen: signature regu	ired when reinstating) DATE		I,
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTOR	RS IN 12
TITLE	P	☐ DELETE	1.1 TITLE			Change	Addition
NAME	SARSOUR, ISSAM 12N		1.2 NAME	E			12
STREET ADDRESS			1.3 STAE	et address			[8
CITY-ST-ZIP	SOUTH MIAMI FL		1.4 CITY	- ST - ZIP			
TITLE		DELETE	2,1 TITLE			Change	Addition C
NAME			2.2 NAME	E			
STREET ADDRESS			2.3 STRE	ET ADDRESS			
CITY-ST-ZIP		Toriere	2. 4 CITY			10	1 4 2 100
TITLE		DELETE	3.1 TITLE			L Change	☐ Addition
NAME			3.2 NAM8				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	3,4. CITY 4,1 TITLE			Change	Addition
	ļ	L. J DICCIE		1		C Cusuffe	L Addition
NAME			4. 2 NAM	ET ADDRESS			
STREET ADDRESS							
CITY-ST-ZIP TITLE			•				l l
NAME		T DELETE	4,4 CITY-	-ST-ZIP		Change	Addition
STREET ADDRESS		DELETE	4.4 CITY- 5.1 TITLE	-ST-ZIP		Change	☐ Addition
CITY-ST-ZIP	t was a second of the second of	☐ DELETE	4.4 CITY- 5.1 TITLE 5.2 NAME	- ST - ZIP		Change	Addition
		☐ DELETE	4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREE	- ST - ZIP E ET ADORESS		Change	Addition
TITLE		☐ DELETE	4.4 CITY- 5.1 TITLE 5.2 NAME	E ET ADORESS - ST- ZIP		Change	Addition Addition
			4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-	E ET ADDRESS - ST-ZIP			
TITLE			4.4 CITY- 5.1 TILLE 5.2 NAME 5.3 STREE 5.4 CITY- 6.1 TITLE 6.2 NAME	E ET ADDRESS - ST-ZIP			
TITLE NAME	· •		4.4 CITY- 5.1 TILLE 5.2 NAME 5.3 STREE 5.4 CITY- 6.1 TITLE 6.2 NAME	E ET ADDRESS - ST-ZIP			

14. 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 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 Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

MONATURE 24 N. 14