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 # 504759

(2)

FOODWAY OF LAKE CITY, INC.

FILED Jan 27 1998 8:00am Secretary of State



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Principal Place of Business Mailing Address										
109 OLD COUNTRY CLUB ROAD P.O. BOX 2095 LAKE CITY FL 32056					109 OLD COUNTRY CLUB ROAD P.O. BOX 2095 LAKE CITY FL 32056					DO NOT WRITE IN THIS SPACE
										3. Date Incorporated or Qualified 06/08/1976
2. Principal Place of Business					2a. Mailing Address					4. FEI Number Applied For
21					26					59-1674561 Not Applicable
Sulte, Apt. #, etc.					Suite, Apt. #, etc.					5. Certificate of Status Desired \$8.75 Additional
22	City & State				City & State					Fee Required
23					28					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
	Zip		Country		Zip		Col	intry	,	8. This corporation owes or has paid the current year Intangible
24		25 29					30			
g. Name and Address of Current Registered Agent								81	Marsa	10. Name and Address of New Registered Agent
		RIS, HARVI						81 Name		
OLD MILL ROAD LAKE CITY FL								82	Street Add	ddress (P.O. Box Number is Not Acceptable)
	UNI	NE OILL FL	1					83	··	Annual to such a Made and the M
								0.4	0.5	Teel 7:- Code
								84	City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the office or registered agent, or both, in the State of Florida. Such change was authoragent. I am familiar with, and accept the obligations of, Section 607.0505, Florida								d by	the corpora	orporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered
SIGNATURE										
		Signature, typed	or printed name of reg			(NO1	E: Registere	d Age	int signature requ	quired when reinstating) DATE
12		PD	OFFIC	ERS AND DIF		DOLOTE	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITI	1	. –	LIADUEV		£	DELETE	1.1 T			. La Change La Addition
NAME BORIS, HARVEY STREET ADDRESS OLD MILL ROAD					1.2 NAM			1000000		
		LAKE C							ADDRESS	
TITI	Y-ST-ZIP	STD				DELETE	2.1 T	TIF	1-214	Change Addition
NAJ	i i		PATRICIA F.		•		2.2 N			
	EET ADDRESS		L ROAD						ADDRESS	
	Y-ST-ZIP	LAKE C							ST-ZIP	
TITE			_		[DELETE	3.1 T			☐ Change ☐ Addition
NAI	AE .		•				3.2 N	AME		
STR	EET ADDRESS						3.3 S	TREET	ADDRESS	
CIT	Y-ST-ZIP						3.4. 0	ITY-S	ST - ZIP	
TITU	£					DELETE	4.1 Ti	TLE		L Change L Addition
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STR	EET ADORESS						4.3 S	FREET	ADDRESS	
	Y-ST-ZIP				-	TOURTE	4.4 C		T-ZIP	Change Addition
TITE					L	DELETE	5.1 T			☐ Change ☐ Addition
NAM	i						5.2 N		4000000	
	EET ADDRESS								ADDRESS T. 7H2	
CIT	Y-ST-ZIP					DELETE	5.4 C 6.1 T		T-ZIP	Change Addition
NAN	l l						6.2 N			- Fidulation
	EET ADDRESS								ADDRESS	
	Y-ST-ZIP								T-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