FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

589751

(7)

FILED Mar 13 1998 8:00am Secretary of State

LUCY	s meat market corpo	RATION				
Principal Place of Business Mailing Address				· · · · · · · · · · · · · · · · · · ·	r inditer alien i faine ratio sander asint iver avens a	INN ANDER ALDS: AIMH DIRIT JAM:
1708 NW 6TH ST 1708 NW 6TH ST						
FT LAUDERDALE FL 33311 FT LAUDERDALE FL 33311					DO NOT WRITE IN TH	IO ODACE
1					3. Date Incorporated or Qualified	IS SPACE
]					10/16/1978	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For
21 26					59-1852679	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						\$8.75 Additional
22 27					5. Certificate of Status Desired	Fee Required
City & Stat	le	City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23					Trust Fund Contribution	Added to Fees
Zip	Country Zip		Coun	try	8. This corporation owes or has paid the	
24	25 25 Cur	29	30		Personal Property Tax due June 30. 10. Name and Address of New Registere	Yes No
1 100	9, Name and Address of Cur	teur wedistered Agent		1 Name	10. Name and Address of New Hegisters	na waleur
HECHAVARRIA, VICTOR						
2580 N W 123 ST MIAMLF L. FL 33167			8	2 Street Addr	ress (P.O. Box Number is Not Acceptable)	
MI	AMILE L. FL 33107		5	3		
			Ľ	<u> </u>		
			8	4 City	F	85 Zip Code
11 Pursuant	to the provisions of Sections 607 (1502 and 607 1508. Florida Ste	tutes the abo	ve-named corn		
office or i	registered agent, or both, in the St	ate of Florida. Such change wa	is authorized	by the corporat	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	ppointment as registered
	am ramiliar with, and accept the oc	algations of, Section 607.0505,	Fiorida Statut	es.		
SIGNATURE	Signature typed or printed name of registered	agent and title if applicable. (f	VOTE: Registered /	gent signature requir	red when reinstating) DATE	
12.		AND DIRECTORS	13.	<u> </u>	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE		DELETE	1.5 TOTAL			Change Addition
NAME	HECHAVARRIA, NELZA		1.2 NAME			
STREET ADDRESS			1.3 STRE	ET ADDRESS		
CITY-ST-ZIP	MIAMI FL			-ST-ZIP		
TITLE	· —		2.1 TITLE			Change Addition
NAME	HECHAVARRIA, PABLO		2.2 NAM	E	· ·	
STREET ADDRESS	2580 NW 123RD STREET		2.3 STRE	ET ADDRESS		
CITY-ST-ZIP	MIAMI FL			-ST-ZIP		
TITLE	MEGUANA DOLA MOTOD		3.1 TITLE			☐ Change ☐ Addition
NAME	HECHAVARRIA, VICTOR		3.2 NAM			
STREET ADDRESS) MAAA CI		1	ET ADDRESS		
CITY-ST-ZIP	MIAMI FL	T no eve		-ST-ZIP		Change [7] 1 (29)
TITLE		☐ DELETE	4.1 TITLE	ļ.		Change Addition
NAME			4. 2 NAW			
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CITY			Change Addition
TITLE			5.1 TITLE			CI Addition
NAME OXDEST ADDRESS			5.2 NAMI			
STREET ADORESS				ET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY 6.1 TITLE			Change Addition
NAME		C oteric	6.2 NAM			C Autority C Lytholipoli
STREET ADDRESS			l l	-		
			E A S CTOF	ET ADDOCCE		Į.
CITY-ST-ZIP			6.3 STRE 6.4 CITY	ET ADDRESS		

report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an under proposered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in adoptes. indicated on this annual report or sup-officer or director of the corporation of Block 12 or Block 13 if changed, or of