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

PROFIT CORPORATION ANNUAL REPORT

1998

NAME STREET ADDRESS

TITLE NAME

TITLE

NAME

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F46073

(5)

MR. DAVE'S MARKET, INC.

FILED May 04 1998 8:00am Secretary of State

Principal Place of Business		Mailing Address				r ideride tife bille bleit antis nabbe tin bille ainit dien dien dien dien andir anti-		
	venue south	1664 15TH AVENUE SOI						
ST. PETERSBURG FL 33712		st. Petersburg fl 33	ST. PETERSBURG FL 33712			DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified	\neg	
						09/24/1981	ı	
9 Principal P	Place of Business	2a. Mailing Address				4. FEI Number Applied For		
21		H *	26			59-2182712 Not Applicat	nlo.	
Suite, Apt. #, etc.			Suite, Apt. #, etc.			\$8.75 Additional	=	
22		27				5. Certificate of Status Desired Fee Required	ľ	
City & State		Cily & State	City & State			6. Election Campaign Financing \$5.00 May Be		
23		28				Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Cou	intry	'	8. This corporation owes or has paid the current year Intangible		
24	25	29	30			Personal Property Tax due June 30. 🔀 Yes 🔲 No		
	g. Name and Address of Curr	ent Registered Agent				10. Name and Address of New Registered Agent		
FO	REMAN, RICHARD			81	Name		Ì	
4118 - 48TH AVE., S.				82	Street Ad	oddress (P.O. Box Number is Not Acceptable)		
ST.	. PETERSBURG FL 33711							
				83				
				84	City	FL 85 Zip Code	_	
44 Pursuant	to the provisions of Sections 607.0	502 and 607 1508 Florida Statu	tes the a	havi	a-named co	corporation submits this statement for the purpose of changing its registere		
office or i	registered agent, or both, in the Sta am familiar with, and accept the obt	ite of Horida, Such change was	authorize	d by	the corpor	oration's board of directors. I hereby accept the appointment as registered	٢	
SIGNATURE	Signature, typod or printed name of registered a	trung and the Laures able (MI)	If : Ranistare	d And	ont sincalure rec	required whon reinsisting) DATE	-	
12,		AND DIRECTORS	13.		, and a second	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	ㅓ	
TITLE	S	DELETE	1.111	ITLE		☐ Change ☐ Addit	on	
NAME	FOREMAN, H JUDITH		1.2 N	AME				
STREET ADDRESS	4118 - 48TH AVE., S.		1.3 \$1	TREET	ADDRESS		ļ	
CITY-ST-ZIP	ST PETERSBURG FL		1.4 0	ITY-S	J-ZIP		ı	
TITLE	ρ	DELETE 2.1 To		TLE		Change Addili	on	
NAME	FOREMAN, RICHARD LEE		2.2 N	AME	Ì		1	
STREET ADDRESS	4440 4001 1100 0		TREET	ADDRESS				
CITY-ST-ZIP	AT PETEROPHING C		HTY - S	ST-ZIP				
TITLE		DELETE				Change Addit	ion	
NAME			3.2 N	AME	Ì			
STREET ADDRESS	İ		3.3 \$	TREET	ADDRESS			
CITY-ST-ZIP	1		34.0	HTY-S	ST-ZIP			

CITY-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.

4.1 THILE

5.1 TITLE

5.2 NAME

61 TITLE

6.2 NAME 6.3 STREET ADDRESS

4.3 STREET ADDRESS 4.4 CITY - ST - ZIP

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

DELETE

DELETE

DELETE

4-23-98 8/3-8/6/03/

Change

Change

Change

___ Addition

Addition

Addition