

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 13, 2000 8:00 am
Secretary of State

04-13-2000 90089 049 ***150.00

DOCUMENT # F93000000550

1. Entity Name

SMART & FINAL, INC.

Principal Place of Business

Mailing Address

CITADEL DRIVE
COMMERCIAL - CA 90040

P.O. BOX 512377
LOS ANGELES CA 90040-1562
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

95-4079584

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ Delete
PC	ROEDER, ROSS E	600 CITADEL DRIVE	COMMERCE CA 90040	☐
EVP	CHIAVELLI, DENNIS	600 CITADEL DRIVE	COMMERCE CA 90040	☐
EVP	LYNCH, MARTIN A	600 CITADEL DRIVE	COMMERCE CA 90040	☐
VGCS	ALVARADO, DONALD G	600 CITADEL DRIVE	COMMERCE CA 90040	☐
D	GUICHARD, ANTOINE	24 RUE DE LA MONTAT	ST. ETIENNE, FRANCE	☐
D	MCLAUGHLIN, DAVID	600 CITADEL DRIVE	COMMERCE CA 90040	☐

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ Change	☐ Addition
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARTIN A. LYNCH

Date

Daytime Phone #

4/6/00

323/869-7517

CR2E034 (9/99)