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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # F9700003668

Country

25

1. Corporation Name

SHOP-A-SNAK FOOD MART, INC.

Principal Place of Business

Mailing Address

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

27

28

29

Zip

833 GREENSPRINGS HIGHWAY BIRMINGHAM AL 35209

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

22

23

24

Zip

833 GREENSPRINGS HIGHWAY BIRMINGHAM AL 35209

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90224 022 ***150.00

3 1002/000 2004 2001 1004 1004 0014 0014 0014 0	80 12110 01120 01201 1012 1002 		
DO NOT WRITE IN THIS SPACE			
Date Incorporated or Qualifed 07/14/1997			
. FEI Number	Applied For		
63-0481615	Not Applicable		
Certificate of Status Desired	\$8.75-Additional Fee Required		
i. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
This composition away the current year Intendible			

Personal Property Tax.

□ No

Zip Code

X Yes

10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 BENTLEY, SANDY Street Address (P.O. Box Number is Not Acceptable) 82 2900 WEST 23RD ST PANAMA CITY FL 32405 83 84 City

30

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

Country

SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE				
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CP DELETE	1.1 TITLE	☐ Change ☐ Addition	
NAME	MARINO, EDWARD J	1.2 NAME	•	
STREET ADDRESS	2504 VALE DRIVE	1.3 STREET ADDRESS		
CITY-ST-ZIP	BIRMINGHAM AL	1.4 CITY-ST-ZIP		
TILE	VO □ DELETE	2.1 TITLE	. Change Addition	
NAME	MARINO, ANTHONY P	2.2 NAME		
STREET ADDRESS	4021 GREYSTONE DRIVE	2.3 STREET ADDRESS		
CITY: ST: ZIP	BIRMINGHAM AL	2.4 CITY-ST-ZIP		
TITLE	OS □ DELETE	3.1 TITLE	☐ Change ☐ Addition	
NAME	MARINO, E J JR	3.2 NAME		
STREET ADDRESS	1222 GREYSTONE CREST	3.3 STREET ADDRESS		
CITY-ST-ZIP	BIRMINGHAM AL	3.4. CITY-ST-ZIP		
TITLE	☐ DELETE	4.1 TITLE	Change Addition	
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS	,	
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE	DELETE	5.1 TITLE	☐ Change ☐ Addition	
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLÉ	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition	
NAME		6.2 NAME		
STREET ADDRESS	· {	6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CMY-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, with all other like empowered.

SIGNATURE: