

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 27 PH 2:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **G34875** (6)

1. Corporation Name

MERCY SUPERMARKET, INC.

Principal Place of Business

**1410 S.W. 6TH ST.
MIAMI FL 33135-3809**

Mailing Address

**1036 SW 1 STREET
MIAMI FL 33130
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/18/1983

3a. Date of Last Report

05/01/1994

4. FEI Number

59-2278902

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Trust Fund Contribution

Added to Fees

6. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21 1036 S.W. 1 ST.

2a. Mailing Address

26 Suite, Apt. #, etc.

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

MIAMI FLA.

28 City & State

29 City & State

24 Zip

33130

25 Country

US.

29 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**FLORIDA ANNUAL REPORT SERVICES CANTERA
1036 SW A STREET
MIAMI FL 33130**

**81 Name
FLORIDA ANNUAL REPORT SERVICES/CANTERA**

**82 Street Address (P.O. Box Number is Not Acceptable)
ASSOCIATES INC. 1036 S.W. 1 ST.**

83

84 City

MIAMI

FL

**85 Zip Code
33130**

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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.

SIGNATURE

(Signature of Registered Agent or Director)

(NOTE: Registered Agent signature required when re-registering)

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

**TITLE PD
NAME DIAZ, GILBERTO
STREET ADDRESS 1435 S.W. 6TH ST., #2
CITY ST ZIP MIAMI FL**

**11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY ST ZIP**

**P/D, DIAZ NIDIA
2838 S.W. 24 TERRACE
MIAMI FLA.**

☐ Change ☐ Addition

**TITLE STD
NAME DIAZ, NIDIA
STREET ADDRESS 1435 S.W. 6TH ST., #2
CITY ST ZIP MIAMI FL**

**21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY ST ZIP**

**S/T/D, DIAZ NIDIA
2838 S.W. 24 TERRACE
MIAMI FLA.**

☐ Change ☐ Addition

**TITLE
NAME
STREET ADDRESS
CITY ST ZIP**

**31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY ST ZIP**

**900001471729
-05/02/95--01150--003
****400.00 ****200.00**

☐ Change ☐ Addition

**TITLE
NAME
STREET ADDRESS
CITY ST ZIP**

**41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY ST ZIP**

200.00

☐ Change ☐ Addition

**TITLE
NAME
STREET ADDRESS
CITY ST ZIP**

**51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY ST ZIP**

87 4/27

☐ Change ☐ Addition

**TITLE
NAME
STREET ADDRESS
CITY ST ZIP**

**61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY ST ZIP**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

Nidia Diaz

PRES/DIR/SEC.

(Signature and Typed or Printed Name of Signing Officer or Director)

4/25/95

(Typed Name)