

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **G93461** (3)

1. Corporation Name

STOP & SHOP TAMPA MEAT MARKET, INC.



Principal Place of Business

**6817 N. DALE MABRY
TAMPA FL 33634**

Mailing Address

**6817 N. DALE MABRY
TAMPA FL 33634**

3. Date Incorporated or Qualified
03/28/1984

3a. Date of Last Report
04/03/1995

2. Principal Place of Business

21 3907 BROAD ST TAMPA FL 33614

2a. Mailing Address

26 3907 BROAD ST

4. FEI Number

59-2404388

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

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

City & State

23 TAMPA FLA

City & State

28 TAMPA FLA

Zip

24 33614

Country

25 Hillsborough

Zip

29 33614

Country

30 Hillsborough

9. Name and Address of Current Registered Agent

**RAMENTOL, EMILIO
6408 WINDWOOD
TAMPA FL 33634**

81 Name

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

83

84 City

FL

85 Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and the applicable date. Registered Agent Signature requires witnessed signature.

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME **P**
STREET ADDRESS **RAMENTOL, EMILIO**
CITY-ST-ZIP **6408 WINDWOOD
TAMPA FL 33634**

TITLE ☐ DELETE
NAME **VP**
STREET ADDRESS **RAMENTOL, MELVA**
CITY-ST-ZIP **6408 WINDWOOD
TAMPA FL 33634**

TITLE ☐ DELETE
NAME **T**
STREET ADDRESS **SANCHEZ, CARLOS**
CITY-ST-ZIP **6412 WINDWOOD
TAMPA FL 33634**

TITLE ☐ DELETE
NAME **S**
STREET ADDRESS **SANCHEZ, AMARAIDA**
CITY-ST-ZIP **6412 WINDWOOD
TAMPA FL 33634**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-18-96

813-882-0091

CR2E034 (12/95)