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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H71355

(2)

FOUR WINDS FINE FOOD MARKET, INC.

FILED Mar 23 1998 8:00am Secretary of State



Principal Place of Business Mailing Address	iei Afāti miris atāti debei ātati atati bidi i
% AFIF Y. TARABAY 6895-F NORTH NINTH AVENUE PENSACOLA FL 32504-7356 PENSACOLA FL 32504-7356 DO NOT WRITE	E IN THIS SPACE
3. Date Incorporated or Qualified 08/01/1985	
2. Principal Place of Business 2a. Mailing Address 4. FEI Number	Applied For
21 26 59-2583139	Not Applicable
Suite, Apt. #, etc Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State City & State 6. Election Campaign Financing	\$5.00 May Be
23 Trust Fund Contribution	Added to Fees
Zip Country Zip Country 8. This corporation owes or has p	
24 25 29 30 Personal Property Tax due Juni 9. Name and Address of Current Registered Agent 10. Name and Address of New Ri	
TARABAY, AFIF Y. 81 Name	
6895-F NORTH NINTH AVENUE 82 Street Address (P.O. Box Number is Not Accepta	ble)
PENSACOLA FL 32504	
B4 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 office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accessed. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	purpose of changing its registered pt the appointment as registered
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature regulated when reinstating)	DATE
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFI	
TITLE D DELETE 1.1 TITLE	Change Addition
NAME TARABAY, AFIF 1,2 NAME	2 OSLA PKWY
NAME TARABAY, AFIF 1.2 NAME 1.2 NAME 1.3 STREET ADDRESS 1.3 STREET ADDRESS 1.4 Survey Drive 2968 1.4 Survey Drive 2968 1.5 STREET ADDRESS 1.6 Survey Drive 2968 1.7 Survey Drive 2968	Shau SERIP 1 1-7
CITY-ST-ZIP PENSACOLA FL 1.4 CITY-ST-ZIP GUIF Breeze, FL 32561-4151	
TITLE PD DELETE 2.1 TITLE	Change
NAME TARABAY, NANCY W. 22 NAME	Strin Army
STREET ADDRESS CITY-ST-ZIP PENSACOLA FL 1.3 STREET ADDRESS CITY-ST-ZIP FENSACOLA FL 1.4 CITY-ST-ZIP FOR ACCOLA FL 1.3 STREET ADDRESS CITY-ST-ZIP FENSACOLA FL 1.3 STREET ADDRESS CITY-ST-ZIP CULT FROM CONTROL CONT	5.1.p 126y.
TITLE DELETE 3.1 TITLE	☐ Change ☐ Addition
NAME 3.2 NAME	Change C Addition
STREET ADDRESS 3.3 STREET ADDRESS	
CITY-ST-ZIP 3.4. CITY-ST-ZIP	
TIFLE DELETE 4.1 TIFLE	Change Addition
NAME 4.2 NAME	
STREET ADDRESS 4.3 STREET ADDRESS	
CITY-ST-ZIP 4.4 CITY-ST-ZIP	
TIFLE DELETE 5.1 TITLE	Change Addition
NAME 52 NAME	
STREET ADDRESS 53 STREET ADDRESS	ţ
CITY-S1-ZIP 5.4 CITY-S1-ZIP	Observe To Address
TITLE DELETE 6.1 TITLE	L Change L Addition
NAME 6.2 NAME	
STREET ADDRESS 6.3 STREET ADDRESS	\
CITY-ST-ZIP 6.4 CITY-ST-ZIP	I

ipplemental annual report is true and accurate and that my signature shall have the same legal effect as if made u or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that