2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J89341

JOSEPH, LOÙIS JR,

JACKSONVILLE, FL

3982 CHESTWOOD AVE.

Name:

Address:

City-St-Zip:

FILED Jan 07, 2009 Secretary of State

Entity Name: UNITED FOOD STORES, INC.					
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	TH PEARL ST VILLE, FL 32				
Current Mailing Address:			New Mailing Address:		
	TH PEARL ST VILLE, FL 32				
FEI Number:	: 59-2860490	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
JOSEPH, LOUIS JR. 3982 CHESTWOOD AVE. 1701 N. PEARL ST. JACKSONVILLE, FL 32211 US				JOSEPH, LOUIS JR. 1701 N. PEARL STREET JACKSONVILLE, FL 32206 US	
	named entity e of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATURE:				01/07/2009	
	Electro	nic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financir	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	AZAR, VICTOR	ATT CREEK DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S (ALLOUSH, BD 3660 SALT ME JACKSONVILL	ADOW CT N	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T (JOSEPH, SCH 11138 FALLG/ JACKSONVILL	ATE PT CT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	Р () Delete	Title:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: LOUIS JOSEPH **PRES** 01/07/2009