

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 # **K36204** (1)

1. Corporation Name  
**POPULAR MEAT AND FISH MARKET, INC.**

Principal Place of Business  
**1701 NW 119TH STREET  
MIAMI FL 33167-9713**

Mailing Address  
**1701 NW 119TH STREET  
MIAMI FL 33167-9713**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>10/04/1988</b>	3a. Date of Last Report <b>05/01/1995</b>
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number <b>65-0077591</b>	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
<b>RODRIGUEZ-LEWIS, MARIA 1701 NW 119TH STREET MIAMI FL 33167</b>				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 title if applicable

NOTE: Registered Agent signature required when reappointing

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>POI- RODRIGUEZ, CARLOS M.</b>	1.1 TITLE	<b>P/D</b>
NAME	<b>1701 NW 119TH STREET</b>	1.2 NAME	
STREET ADDRESS	<b>MIAMI FL</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE		2.1 TITLE	<b>S/D</b>
NAME		2.2 NAME	<b>LEWIS, MARIA R</b>
STREET ADDRESS		2.3 STREET ADDRESS	<b>2794 S.W. 17th ST.</b>
CITY-ST-ZIP		2.4 CITY-ST-ZIP	<b>FORT LAUDERDALE, FL 33312.</b>
TITLE		3.1 TITLE	<b>T/D</b>
NAME		3.2 NAME	<b>RODRIGUEZ, CARLOS JR.</b>
STREET ADDRESS		3.3 STREET ADDRESS	<b>5000 SW. 163 AVENUE</b>
CITY-ST-ZIP		3.4 CITY-ST-ZIP	<b>FORT LAUDERDALE, FL 33331</b>
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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: *[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4-29-96** **305-4342634**  
Date Daytime Phone #

CR2E034 (12/95)