2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # K36204

1. Entity Name
POPULAR MEAT AND FISH MARKET, INC.

Principal Place of Business	Mailing Address
3940 EAST 4TH AVE	3940 EAST 4TH AVE
HIALEAH, FL 33013	HIALEAH, FL 33013

DO NOT WRITE IN THIS SPACE

01212005   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
65-0077591	Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CABANAS, MARIA C
10520 NW 26 ST
C-201
MIAMI, FL 33172

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE_____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10.   OFFICERS AND DIRECTORS

TITLE	PD	
NAME	RODRIGUEZ, CARLOS M	
STREET ADDRESS	3940 EAST 4TH AVE	
CITY-ST-ZIP	HIALEAH, FL 33013	
TITLE	SD	U00000210194
NAME	LEWIS, MARIA R	02/02/05-80069-009 150.00
STREET ADDRESS	3940 EAST 4TH AVE	
CITY-ST-ZIP	HIALEAH, FL 33013	
TITLE		
NAME		
STREET ADDRESS		**DO NOT WRITE**
CITY-ST-ZIP		**IN THIS SPACE**
TITLE		
NAME		
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____   1/27/05   (305) 822 9661

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #

CARLOS M. RODRIGUEZ