SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # L40822

(3)

SAFEWAY PURCHASING CONSTRUCTION CO., INC.

Principal Place of Business	Mailing Address			
10871 NW 33 ST MIAMI FL 33172 US	10871 NW 33 ST Miami FL 33172 US			
Principal Place of Business 1	2a. Mailing Address			
5 to 4 to 5				

FILED Jul 29 1998 8:00am Secretary of State



VIAMI FL 3317									
US ·		US				DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified			
						01/03/1990			
2. Principal P	Principal Place of Business 2a. Mailing Address					4. FEI Number		Applied For	
1		26				65-0172478		Not Applicable	
Suite, Apt.	#, elc.	Sulte, Apt. #	, etc.			5. Certificate of Status Desired		75 Additional	
2		27			,	5. Cottilicate of Status Desired	Fe	e Required	
City & Stal	te	City & State		-		6. Election Campaign Financing	\$5	.00 May Be	
3		28				Trust Fund Contribution		ded to Fees	
Zip	Country	Zip	F	Country		8. This corporation owes or has paid the cur			
4	[25]	29	30	r		Personal Property Tax due June 30.	Yes	No	
	9, Name and Address of Currer	t Registered Agent		-		10. Name and Address of New Registered	Agent		
SAR	MIENTO, MANUEL A.			81	Name				
	05 9.W. 52 TERR: 14320 5			82	Street Ad	dress (P.O. Box Number is Not Acceptable)			
MIAI	MI-FL-33165 MipMI, F	¥ 33/75			·				
	•			83					
	•			84	City		85	Zip Code	
					Oily	FL	. ["	Z.ip 0000	
11. Pursuani	t to the provisions of sections 607.050;	2 and 607.1508, Florid	la Statutes, the	above-	named corp	poration submits this statement for the purpose of charition's board of directors. I hereby accept the appoint	enging	its registered	
agent. I	am familiar with, and accept the obliga	ations of, section 607	.0505, Florida S	Statutes	ино согрога i.	mon's board of birectors. Thereby accept the appoi	HINTOH (as registered	
SIGNATURE									
	Signature, typed or printed name of registered ager				gent signature re	aquired when reinstating) DATE			
2.		ID DIRECTORS		3.		ADDITIONS/CHANGES TO OFFICERS AN	ID DIRE	CTORS IN 12	
ITLE	PD	[] Di	ELETE 1.1	1 TITLE		•	Cha	nge Addition	
AME	SARMIENTO, MANUEL A.		£ 1.3	2 NAME					
TREET ADDRESS .	10505 S.W. 52-TERR: 1432	D 3.10.31 ~	1.3	STREET	ADDRESS				
ITY-ST-ZIP	MIAMI FL			CITY-ST	-ZIP				
ITLE	VID	Di	LETE 2.1	TITLE			Cha	nge Addition	
IAME	SARMIENTO, ISABEL M. 10505 S.W. 52 TERR. 14320	. 4	2.2	2 NAME	}			•	
TREET ADDRESS	10505 S.W. 52 TERR. 14320	5.W. 38 5	2.3	STREET	ADDRESS				
TY-ST-ZIP	MIAMI FL			CITY-ST	Į				
ITLE		T Di		TITLE			Cha	nge Addition	
AME	}	(, D)		2 NAME			٥١١٥ يــ	AS FT HANGION	
TREET ADDRESS			1	STREET	ADDRESS				
CITY-ST-ZIP				4 CITY-ST					
ITLE		Пр		TITLE			Cha	nge Addition	
AME		L_J (/I	LLIL	NAME	1		L Una	AGUILLAND	
TREET ADDRESS			1	STREET.	ADDRESS				
					1			1	
ITY-ST-ZIP ITLE				CITY-ST	ZIP		T		
		L_ DE					Cha	nge [] Addition	
AME				NAME					
TREET ADDRESS			f	STREET	i			i	
ITY-ST-ZIP				CITYST	ZIP		 -		
ITLE		[] DE	,	TITLE	ļ		Cha	nge 🔲 Addition	
AME				NAME	Į				
TREET ADDRESS			6.3	STREET	ADDRESS				
TY-ST-ZIP				CITY-ST					
4. I hereby ce	ertify that the Information supplied with	this filing does not gu	alify for the exe	mption	stated in se	ction 119.07(3)(i), Florida Statutes, I further certify t	hat the	nformation	

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:

305.513.9939