## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED May 02, 2005 08:00 AN DOCUMENT # L46499 **Secretary of State** 1. Entity Name MEXICO SUPERMARKET, INC. Mailing Address Principal Place of Business 1674 RIFLE RANGE RD. 1674 RIFLE RANGE RD WINTER HAVEN, FL 33880 WINTER HAVEN, FL 33880 US US 04292005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3063165 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GARCIA, JOAQUIN ABEL DO NOT WRITE 217 6TH STREET WINTER HAVEN, FL. 33880 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 \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. MLE NAME GARCIA, JOAQUIN ABEL 217 6TH STREET STREET ADDRESS UD0000351416 05/02/05-80145-802 150.00 WINTER HAVEN, FL CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP THE NAME STREET ADDRESS DO NOT WRITE CTTY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CTTY-ST-ZIP TITLE 49. 44 248 12 S4E0,00 NAME

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. JOAQUIN A. GARCIA

Davime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGN

STREET ADDRESS CITY.-ST-ZIP