## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State FILED DIVISION OF CORPORATIONS 1997 97 JUN -2 AM 9: 28 DOCUMENT # L83051 SECRETARY OF STATE LOPEZ & LOPEZ ENTERPRISES CO. TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 918 N.W. 36th Street c/o Opportunity Supermarket Miami, FL 33127 918 N.W. 36th Street Miami, FL 33127 3. Date Incorporated or Qualified 3a. Date of Last Report 06/26/1990 02/21/96 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0202625 21 26 Not Applicable Suite, Apt #, etc Suite. Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 24 Yes No 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name Jorge L. Lopez Francisco E. Lopez Street Address 17 18 N.W. 36th Street 82 918 N.W. 36th Street 'Miami, FL 33127 83 84 City 33127 Miami 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 Francisco E. Lopez \(\neg{\chi}\) 03/31/97 SIGNATURE name of registered agent and title if a 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. D/P/S/T 🔟 bijetē Change Addition TITLE 1.1 TITLE Francisco E. Lopez NAME 1.2 NAME 06/06/97--010/9--005 918 N.W. 36th Street STREET ADDRESS 1.3 STREET ADDRESS \*\*\*\*\*165。(我) \*\*\*\*\*165。(我) Miami, FL 33127 CITY-ST-ZIP 1.4 CHTY - ST - ZIP DET LIE 2.1 HILE Change NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CHY-S1-70 DELETE Change Addition TITLE 3.1 TiTLE 002204575—6 -06/06/97-01099-006 NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDIRESS 米米米米记品。[10] CITY-ST-ZIP 3.4 C(1Y+S1-Z)P DELETE 4.1 TITLE Change Addition TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - S1 - 7/P CITY-ST-ZIP DELLIE Change Addition TITLE 5.1 TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - 7IP TITLE DELETE 6111111 Change Addition NAME 6.2 NAME

6.3 STREET ADDRESS

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Floride 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

SIGNATURE:

STREET ADDRESS

townsia The

appears in Block 12 or Block 13 if changed, or on an attachment with an advices

03/31/97

305-633-2388