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PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # M50119

(0)

PIT STOP FOOD STORES, INC.

FILED Jun 16 1997 8:00am Secretary of State

r micipal r lace of business		Mailing Address			
26-73 O/S HWAY MARATHON FL 33060 US		115-87 3RD AVE OCN MARATHON FL 33050-3610 US			
				3. Date Incorporated or Qualified	3a. Date of Last Report
		<u>'</u>		04/10/1987	05/01/1996
2. Pri	ncipal Place of Business	2a. Mailing Address	2 ~ 6	4. FEI Number	Applied For
21		26 387 E. SELVIE	W DE	54-0001973	Not Applicable
Su 22	ite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Cit 23	y & State	City & State 28 MARATHON,	FL.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	25	29 3305U 30 M	untry 100 ROE	8. This corporation has liability for i	ntangible tax under s. 199.032, Yes 🔼 No
				10. Name and Address of New Registered Agent	
:	VASQUEZ FABIO 115-87 3RD AVE OCEAN		81 Name FABIO J. VASQUEZ-		
	MARATHON FL 33050			ss (P.O. Box Number is Not Acceptable SEAVIEW	<u>E</u>
•		1093		K KEY	
:		; cal	84 City	RATHON	FL 85 Zip Code T

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 registerod agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE Change Addition 1.1 TITLE **VASQUEZ AMPARO** NAME 1.2 NAME 115 87 3RD AVE. OCN STREET ADDRESS 1.3 STREET ADDRESS MARATHON FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 2.1 THEE Change Addition YASQUEZ FABIO J NAME 2.2 NAME 115-87 116 ST 3AVE OCEAN STREET ADDRESS 2.3 STREET ADDRESS MARATHON FL CITY-ST-ZIP 2 4 CiTY-ST-ZIP TITLE DELETE Addition 3.1 TOLE NAME VASQUEZ, FABIO A. 3.2 NAME STREET ADDRESS 115-87 116 ST 3AVE OCEAN 3.3 STREET ADDRESS MARATHON FL CITY-ST-ZIP 3 4. CITY - ST - ZIP DELETE TITLE 4.1 DTLE Change Addition NAME WILLIAM VASQUEZ 4. 2 NAME 205 SW 75 ST #B6 STREET ADDRESS 4.3 STREET ADDRESS **GAINESVILLE FL** CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 513006 ANDREA VASQUEZ NAME 5.2 NAME **444 ORIENTAL POINT** STREET ADDRESS 5.3 STREET ADDRESS **ALTAMONTE SPRINGS FL** CITY-ST-ZIP 5.4 CITY - \$1 - ZIP DELETE TITLE 6.1 TITLE Addition **FABIAN VASQUEZ** NAME 6.2 NAME 2401 WINDY HILL RD, APT. 2452P STREET ADDRESS 6.3 STREET ADDRESS

MARIETTA GA 6.4 CITY - S1 - 7IP 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), Florida Statutes. I further certify that the information indicated on this annual report of 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.