FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1996

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M83841 (0)

Corporation Name

Q FOOD MART, INC.

Principal Place of Business	Mailing Address
2902 W COLUMBUS DR TAMPA FL 33607 US	2902 W COLUMBUS DR TAMPA FL 33607 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/27/1988
3a. Effective Date of Report: 05/11/1996
4. FEI Number: 59-2894887
5. Certificate of Status Desired: [ ] $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: [ ] $5.00 May Be Added to Fee
8. This corporation has been, and shall remain, in good standing with the Florida Secretary of State: [X] Yes [ ] No

21 Street Address
22
23 City & State
24 Country 25

26 401. LAKE AVE.
27 Suite, Apt. #, etc.
28 LAKEWORTH . FL.
29 Zip 33460
30 Country U.S.A.

9. Name and Address of Current Registered Agent

PATEL, YOGESH
5766 TURNWOOD CT
APT 137
JUPITER FL 33458

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement to change 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 and I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

12. OFFICERS AND DIRECTORS

D
PATEL, YOGESH
5766 TURNWOOD CT
JUPITER FL

DP
PATEL, RAJESH
6900 WOONSOCKET
CANTON MU

D
PATEL, NAYAN
35 BUXTON LANE
BOYNTON BCH FL

D
PATEL, NILESH
142 PINEWOOD CT.
JUPITER FL

D
PATEL, SONAL
3814 W. EUCLID AVE., STE. 52
TAMPA FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY ST ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY ST ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY ST ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY ST ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY ST ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY ST ZIP

100001808081
-05/06/96--01014--009
***200.00

14. I hereby certify that the information supplied with this filing is voluntarily furnished and 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 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: N.V. Patel NAYAN PATEL 4-26-96 (407) 585-2888

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

AR-96