2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

POOCOCO DOCLIMENT #



FILED
Mar 03, 2003 8:00 am E
Secretary of State

1. Entity Name ST. LAZARUS SUPERMARKET, INC.							03-03-2003 90426 022 ***150.00			
Principal Place of Business 2288 SW 5TH ST. MIAMI FL 33135			Mailing Address 2288 SW 5TH ST. MIAMI FL 33135							
Place of Busi	ness	3. Ma	ilina Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES			
City & State			City & State			4.	4. FEI Number 65-1014880 Applied For]
Zip Country		Zip	Zip Cour		ry	5.	. Certificate of Status Desired	\$8.75 A	dditional	1
_ 6. Name	and Address of Cur	rent Register	ed Agent	ТТ		7.	Name and Address of New Registered		irea	4
-					Name		the respective	Ageni	· · · · · ·	1
2288 SW 5TH ST.					Street Addres	Street Address (P.O. Box Number is Not Acceptable)				\forall
. 33135				}	***					-
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ations of regist	y submits this stateme ered agent.	nt for the purp	ose of changing its	registere	d office or regis	tered a	gent, or both, in the State of Florida. I am	familiar with	n, and accept	
Signature, typed	or printed name of registered a	agent and title if app	olicable. (NOTE	: Registered	Agent signature requi	red when	(einstation) DATE			
er May 1, 200	3 Fee will be \$550.	.00 nt of State					9. Election Campaign Financing Trust Fund Contribution. [\$5. □ Adde	00 May Be ed to Fees	4
I n=n	OFFICERS A	ND DIRECTO	RS	11.		Α	I DDITIONS/CHANGES TO OFFICERS AND	DIRECTO	RS IN 11	┧
ALVAREZ, 2288 SW 5	STH ST.		☐ Delete		l l			☐ Change	Addition	100,000
2288 SW 5	TH ST.		☐ Delete					☐ Change	☐ Addition	
	, Purbos . P .		Delete	STREET	ADDRESS			☐ Change	Addition	-
	`		☐ Delete					☐ Change	☐ Addition	
			☐ Delete	1	I	_		☐ Change	☐ Addition	
		111	☐ Delete	TITLE NAME				☐ Change	Addition	
	ARUS SUI ace of Busines H ST. B135 Place of Busi t. #, etc. ate 6. Name 7. LAZARO M 7. 5TH ST. 7. 33135 e named entitions of regist signature, typed FILE NOW!! FMay 1, 200 k Payable to PTD ALVAREZ, 2288 SW 5 MIAMI FL 3 VS ALVAREZ, 2288 SW 5 ALVAREZ, 2288 SW 5	ARUS SUPERMARKET, If ace of Business H ST. B135 Place of Business L #, etc. ate Country 6. Name and Address of Cur 7. LAZARO M 5TH ST. B13135 e named entity submits this statementations of registered agent. Signature, typed or printed name of registered agent. FILE NOW!!! FEE IS \$150.00 B15TH ST. FILE NOW!!! FEE IS \$150.00 B15TH ST. ALVAREZ, LAZARO M 2288 SW 5TH ST. MIAMI FL 33135 VS ALVAREZ, VICTOR M 2288 SW 5TH ST. MIAMI FL 33135	ARUS SUPERMARKET, INC. ace of Business	ARUS SUPERMARKET, INC. Company Company	ARUS SUPERMARKET, INC. ace of Business H ST. 2288 SW 5TH ST. MIAMI FL 33135 Place of Business 3. Mailing Address L #, etc. Country Zip Count Country Zip Count G. Name and Address of Current Registered Agent C, LAZARO M STH ST. 33135 Country Signature, hyped or printed name of registered agent and title # applicable. (NOTE Registered Agent Cirvs Signature, hyped or printed name of registered agent and title # applicable. PILE NOW!!! FEE IS \$150.00 or May 1, 2003 Fee will be \$550.00 k Payable to Florida Department of State OFFICERS AND DIRECTORS PTD ALVAREZ, LAZARO M 2288 SW 5TH ST. MIAMI FL 33135 VS ALVAREZ, VICTOR M 2288 SW 5TH ST. MIAMI FL 33135 Delete TITLE NAME STREET CITY-S Delete TITLE NAME STREET CITY-S Delete TITLE NAME STREET CITY-S Delete TITLE NAME STREET CITY-S Delete TITLE NAME STREET CITY-S Delete TITLE NAME STREET CITY-S Delete TITLE NAME STREET CITY-S Delete TITLE NAME STREET CITY-S Delete TITLE NAME STREET CITY-S Delete TITLE NAME STREET CITY-S Delete TITLE NAME STREET CITY-S Delete TITLE NAME STREET CITY-S Delete TITLE NAME STREET CITY-S Delete TITLE NAME STREET CITY-S Delete TITLE NAME STREET CITY-S Delete TITLE NAME STREET CITY-S Delete TITLE NAME STREET CITY-S Delete TITLE NAME STREET CITY-S Delete	ARUS SUPERMARKET, INC. Accord Business	ARUS SUPERMARKET, INC. Additing Address A	ARAUS SUPERMARKET, INC. 03-03-2003 90426 0	AROUS SUPERMARKET, INC. Country	ACTION SUPERMARKET, INC. 03-03-2003 90/426 022 ***150.00

I hereby certify that the information supplied with this filing does not orgalify 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 trifstee 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. LAZARO M. ALVAREZ, PRES. SIGNATURE: X TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #