

102

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000119069

1. Entity Name
PRICE SUPERMARKET, INC.

FILED

02 JUN 13 PM 1:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2002 UBR

2. Principal Place of Business
8360 BISCAYNE BLVD
Suite, Apt. #, etc.

3. Mailing Address
8360 BISCAYNE BLVD
Suite, Apt. #, etc.

City & State
MIAMI, FL
Zip
33138
Country
USA

City & State
MIAMI, FL
Zip
33138
Country
USA

4. FEI Number
80-0004162

Applied For
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
RAUL SANCHEZ

Street Address (P.O. Box Number is Not Acceptable)

8360 BISCAYNE BLVD

City
MIAMI

FL Zip Code
33138

8. The above named entity admits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, Office or printed name of registered agent and title if applicable.

(ND) Registered Agent Signature (required when nonstate)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back)

January 1 - May 1: Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
RAUL SANCHEZ (P/S/O)
8360 BISCAYNE BLVD.
MIAMI, FL 33138

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

100006110521-8
-06/28/02--01067--018
****150.00 ****150.00

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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or on an attachment with an address, with another like empowered.

SIGNATURE:

Raul Sanchez (P) 06/2/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2120-13

2082

PRICE SUPERMARKET, INC.
DOC.#P01000119069

TO: DIVISION OF CORPORATION
P.O. BOX 6327
TALLAHASSEE, FL 32314

TO WHOM IT MAY CONCERN:

ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION.

I NEVER RECEIVED NOTICE OF SUCH REPORT. PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN ITS CURRENT STATUS.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME.



CORDIALLY
RAUL SANCHEZ
PRESIDENT