

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000062124

1. Entity Name

LEMONCITY GROCERY, INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08-13-2003 90073 032 ***150.00
03 JUL 11 AM 9:21

Principal Place of Business
1200 N.E. 160TH STREET
NORTH MIAMI BEACH FL 33162

Mailing Address
1200 N.E. 160TH STREET
NORTH MIAMI BEACH FL 33162

2. Principal Place of Business
6212 N.E. 2nd Avenue

3. Mailing Address

☐ CHECK HERE IF MAKING CHANGES

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Miami, Florida

City & State

4. FEI Number
01-0706107

Applied For
Not Applicable

Zip
33138

Country
Dade

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BARNHART, MARIA R
1200 N.E. 160TH STREET
NORTH MIAMI BEACH FL 33162

Name

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

City

FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PD
BARNHART, MARIA R
1200 N.E. 160TH STREET
NORTH MIAMI BEACH FL 33162

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Miguel Nunez

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Vice President
Miguel Nunez
1200 N E 160th Street
North Miami Beach, FL 33162

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12. I 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Miguel Nunez*

8-11-03 (305) 759-8787

Attachment #
8013069
DO2000062184
LEMONCITY GROCERY INC.
612 NE 2ND AVE
MIAMI, FL 33138-6009

Uniform Business Report
DIVISION of CORPORATIONS
P.O. BOX 1500
TALLAHASSEE, FL 32302-1500

To Whom It May Concern,

8.11.2003

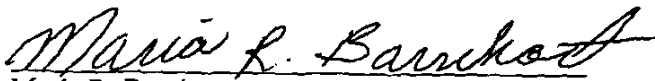
As we received the Corporate Annual Form, we became aware, that we had not previously received the Form.

Since we did not receive the document at all, we are requesting to pay the regular annual fee, which is \$ 150. It is truly not our fault that we did not get the form to file. As a small retailer we have so many things to accomplish, any given day. So it did not come to our attention that we missed to receive the form.

We apologize for any inconvenience this may have cost your organization and we hope that we can "catch up" with the missed fee and that our account will be paid in full.

We appreciate your help.

Sincerely,


Maria R. Barnhart
PRESIDENT