

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91274 004 ***150.00

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1. Entity Name
ELEGANT SUPERMARKET, INC.



Principal Place of Business
14715 NE 8TH AVENUE
NORTH MIAMI FL 33161-2304

Mailing Address
14715 NE 8TH AVENUE
NORTH MIAMI FL 33161-2304

2. Principal Place of Business
14690 W. Dixie Hwy
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
Miami, Florida

City & State

Zip Country
33161 USA

Zip Country

☒ CHECK HERE IF MAKING CHANGES
4. FEI Number 16-1624675
21061781-230287
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

LOUIS, JOACHIM
14715 NE 8TH AVENUE
NORTH MIAMI FL 33161-2304

7. Name and Address of New Registered Agent

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Feb. 20, 2003

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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

TITLE PD
NAME LOUIS, JOACHIM
STREET ADDRESS 14715 NE 8TH AVENUE
CITY-ST-ZIP NORTH MIAMI FL 33161-2304

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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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: *Joachim Louis*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb. 20, 2003 (305) 45-5518
Date Daytime Phone #

CR2E034 (10/02)