2005 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Jan 24, 2005 08:00 AM DOCUMENT # P02000106308 **Secretary of State** 1. Entity Name FOOD STAR SUPERMARKET #6, INC. Principal Place of Susiness Mailing Address 14778 SW 56 STREET 14778 SW 56 STREET MIAMI, FL 33156-4070 MIAMI, FL 33156-4070 No Chg-P 01142005 CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 02-0646694 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent MARQUEZ, JOSE M DO NOT WRITE 782 NW LEJEUNE RD STE 548 M/AMI, FL 33126 IN THIS SPACE 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) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS 01/25/05-80025-022 150.00 D TITLE HERNANDEZ, DIOSDADO NAME STREET ADDRESS 10131 SW 4 ST MIAMI, FL 33174 CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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 of the corporation or the receiver or truste changed, or on an attachment with an ad-

CITY-ST-ZIP TITLE

STREET ADDRESS CITY-ST-ZIP

Daytima Phone #