

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000122553

Entity Name: LA COPA NUEVA SUPERMARKET, INC.

FILED  
Sep 18, 2009  
Secretary of State

## Current Principal Place of Business:

3940 EAST 4TH AVENUE  
HIALEAH, FL 33013

## New Principal Place of Business:

5150 NORTH STATE RD 7  
NORTH LAUDERDALE, FL 33319

## Current Mailing Address:

3940 EAST 4TH AVENUE  
HIALEAH, FL 33013

## New Mailing Address:

5150 NORTH STATE RD 7  
NORTH LAUDERDALE, FL 33319

FEI Number: 36-4513754

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEWIS, MARIA R  
1928 SW 101 AVENUE  
DAVIE, FL 33324 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: RODRIGUEZ, CARLOS M SR.  
Address: 5000 SW 163 AVENUE  
City-St-Zip: SOUTHWEST RANCHES, FL 33331

Title: VP ( ) Delete  
Name: RODRIGUEZ, CARLOS M JR.  
Address: 5000 SW 163 AVENUE  
City-St-Zip: SOUTHWEST RANCHES, FL 33331

Title: S ( ) Delete  
Name: LEWIS, MARIA R  
Address: 1928 SW 101 AVENUE  
City-St-Zip: DAVIE, FL 33324

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARLOS M. RODRIGUEZ, SR.

P

09/18/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date