2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 25, 2007 08:00 AN Secretary of State

1. Entity Nam	MENT # P0300004863 equation of the street foodmart inc				secreta	ry of Sta	
Principal Plac 935 49 TH S SAINT PETER		0					
	O NOT WRITE II	CE	01212007 4. FE! Number 32-007 5. Certificate	4100 of Status Desired	CR2E034 (
	3 H ^ AVE. NORTH TERSBURG, FL 33710	DO NOT WRITE IN THIS SPACE					
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 little if applicable (NOTE Registered Agent signature required when reinstating) DATE							
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution.				.00 May Be led to Fees			
TOLE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LEE, JUNG H 5971 21ST AVE. NORTH SAINT PETERSBURG, FL 33710 VP LEE, BU K 5971 21ST AVE. NORTH SAINT PETERSBURG, FL 33710	CTORS			1/100000 01/29/07-	603131 80001-00	9 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	S. A. T. P.				NOT W THIS SI		10000000000000000000000000000000000000
CITY-ST-ZIP INLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
indicated of the cor	certify that the information supplied with this fi on this report or supplemental report is true a poration or the receiver or trustee empowere or on an attachment with an address, with all	and accurate and that my signated to execute this report as required.	ure shall have the	same lenal effec	o as if made under	cath that Lam a	a officer or director

SKINATURE AND PYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: _