2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000166085

Entity Name: D & J SUPERMARKET, CORP.

FILED Mar 07, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 11180 W. FLAGLER STREET MIAMI, FL 33174 **Current Mailing Address: New Mailing Address:** 11180 W. FLAGLER STREET MIAMI, FL 33174 FEI Number: 05-0613135 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: BRITO, MAYRA COBA BRITO, MAYRA COBA 2462 NATURE POINTE LOOP 11180 W. FLAGLER STREET FT. MYERS, FL 33905 #7 MIAMI, FL 33174 US 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: MAYRA COBA 03/07/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition BRITO, MAYRA COBA Name: BRITO, MAYRA COBA Name: 2462 NATURE POINTE LOOP 11180 W. FLAGLER STREET #7 Address: Address: FT. MYERS, FL 33905 City-St-Zip: City-St-Zip: MIAMI, FL 33174 () Delete Title: VΡ () Change (X) Addition Title: Name: Name: PEREZ, EDUARDO 11180 W. FLAGLER STREET #7 Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33174 Title: () Change (X) Addition () Delete Title: VΡ LOPEZ, OSMANY Name: Name: 2945 SE 24TH AVE Address Address: City-St-Zip: City-St-Zip: NAPLES, FL 34117 Title: () Delete Title: VΡ () Change (X) Addition PEREZ, CARLOS Name: Name: Address: Address: 10202 SW 33ER ST City-St-Zip: City-St-Zip: MIAMI, FL 33165 Title: Title: () Change (X) Addition () Delete Name: Name: MATHEI, ANTHONY Address: Address: 10725 BLUE BIMINI CIRCLE City-St-Zip: City-St-Zip: ESTERO, FL 33928

I hereby certify that the information supplied with this filing does not qualify for the 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: MAYRA COBA P 03/07/2007