2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000166085

Entity Name: D & J SUPERMARKET, CORP.

FILED Apr 17, 2008 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
11180 W. F	FLAGLER ST	REET			
#7 MIAMI, FL	33174				
Current Mailing Address:			New Mailing Addre	ess:	
#7	FLAGLER ST	REET			
MIAMI, FL	33174				
FEI Number:	05-0613135	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and Address	of New Registered Agent:	
	YRA COBA FLAGLER ST	REET			
	33174 US				
	named entity e of Florida.	submits this statement for the p	urpose of changing its registe	red office or registered agent, or both,	
SIGNATURE:					
	Electro	nic Signature of Registered Age	nt	Date	
Election Can	npaign Financir	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	BRITO, MAYR	GLER STREET #7	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PEREZ, EDUA	GLER STREET #7	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (X LOPEZ, OSMA 2945 SE 24TH NAPLES, FL	I AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (X PEREZ, CARL 10202 SW 33 MIAMI, FL 33	ER ST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MATHEI, ANTI	BIMINI CIRCLE	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: MAYRA COBA P 04/17/2008