2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000106859

Entity Name: SHOPPERS FOOD MART INC

FILED Feb 22, 2008 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

201 E HWAY 436 201 E HWY 436

CASSELBERRY, FL 32707 CASSELBERRY, FL 32707

Current Mailing Address: New Mailing Address:

201 E HWAY 436 13318 MEADOWLARK LANE CASSELBERRY, FL 32707 ORLANDO, FL 32828

FEI Number: 20-5419411 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JIMENEZ LOPEZ, HENRY R
201 E HWAY 436
CASSELBERRY, FL 32707
US
OLORUNSOGO, FOLARIN T
13318 MEADOWLARK LANE
ORLANDO, FL 32707
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: FOLARIN OLORUNSOGO 02/22/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: JIMENEZ LOPEZ, HENRY R Name: OLORUNSOGO, FOLARIN T

Address: 201 E HWAY 436 Address: 13318 MEADOWLARK LANE
City-St-Zip: CASSELBERRY, FL 32707 City-St-Zip: ORLANDO, FL 32828

Title: S () Delete Title: S (X) Change () Addition
Name: JIMENEZ SORIA, HENRY R Name: OLORUNSOGO, ESTHER O
Address: 201 E HWAY 436 Address: 13318 MEADOWLARK LANE

 Address:
 201 E HWAY 436
 Address:
 13318 MEADOWLARK LANE

 City-St-Zip:
 CASSELBERRY, FL 32707
 City-St-Zip:
 ORLANDO, FL 32828

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: FOLARIN OLORUNSOGO P 02/22/2008