2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000018940

Entity Name: 1ST ASIAN GROCERY, INC.

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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2615 N. FLORIDA AVE. 2780 N. FLORIDA AVE>
HERNANDO, FL 34442 US 8

HERNANDO, FL 34442 US 8
HERNANDO, FL 34442 US

Current Mailing Address: New Mailing Address:

2615 N. FLORIDA AVE. HERNANDO, FL 34442 US 2780 N. FLORIDA AVE.

HERNANDO, FL 34442 US 8 HERNANDO, FL 34442 US

FEI Number: 36-4623582 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:

AYSON, GLORIA

2615 N. FLORIDA AVE.

HERNANDO, FL 34442 US

AYSON, GLORIA

2780 N. FLORIDA AVE

8

HERNANDO, FL 34442 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: GLORIA AYSON 04/30/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S () Delete Title: S (X) Change () Addition

Name: AYSON, SILVINO Name: AYSON, SILVINO

 Address:
 2615 N. FLORIDA AVE.
 Address:
 2780 N. FLORIDA AVE UNIT *

 City-St-Zip:
 HERNANDO, FL 34442 US
 City-St-Zip:
 HERNANDO, FL 34442 US

Title: PD () Delete Title: PD (X) Change () Addition

Name: AYSON, GLORIA Name: AYSON, GLORIA

 Address:
 2615 N. FLORIDA AVE.
 Address:
 2780 N. FLORIDA AVE UNIT 8

 City-St-Zip:
 HERNANDO, FL 34442 US
 City-St-Zip:
 HERNANDO, FL 34442 US

Title: VD (X) Delete Title: () Change () Addition

 Name:
 CASERO, JULIUS
 Name:

 Address:
 2615 N. FLORIDA AVE.
 Address:

 City-St-Zip:
 HERNANDO, FL 34442 US
 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: GLORIA AYSON PD 04/30/2009