

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Jan 30 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P28573 (4)

1. Corporation Name
SUPER FRESH/SAV-A-CENTER, INC.



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
03/21/1990

4. FEI Number
22-2630228

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30, ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
STREET ADDRESS	DOBSON, DONALD	1.2 NAME	
CITY-ST-ZIP	2 PARAGON DRIVE	1.3 STREET ADDRESS	
	MONTVALE NJ	1.4 CITY-ST-ZIP	
TITLE	NAME	2.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
STREET ADDRESS	VSD	2.2 NAME	
CITY-ST-ZIP	ULRICH, R. G.	2.3 STREET ADDRESS	
	2 PARAGON DRIVE	2.4 CITY-ST-ZIP	
	MONTVALE NJ	3.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE	NAME	3.2 NAME	
STREET ADDRESS	T	3.3 STREET ADDRESS	
CITY-ST-ZIP	MOSS, WILLIAM	3.4 CITY-ST-ZIP	
	2 PARAGON DRIVE	4.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
	MONTVALE NJ	4.2 NAME	
TITLE	NAME	4.3 STREET ADDRESS	
STREET ADDRESS	D	4.4 CITY-ST-ZIP	
CITY-ST-ZIP	CORRADO, F.	5.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
	2 PARAGON DRIVE	5.2 NAME	
	MONTVALE NJ	5.3 STREET ADDRESS	
TITLE	NAME	5.4 CITY-ST-ZIP	
STREET ADDRESS	V	6.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
CITY-ST-ZIP	SCOLA, R.J.	6.2 NAME	
	2 PARAGON DRIVE	6.3 STREET ADDRESS	
	MONTVALE NJ	6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Robert G. Ulrich DATE: 7-16-98 (201) 573-9700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/97)