

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Genda B. Marmorek
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

DOCUMENT # P93000027714 (3)

1. Corporation Name

A-REAL SHOP INC.

15 MAY -1 PM 2:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

1360 SOUTH MAIN STREET
BELLE GLADE FL 33430

Mailing Address

1360 SOUTH MAIN STREET
BELLE GLADE FL 33430

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
04/12/1993

3a. Date of Last Report
05/01/1994

2. Principal Place of Business

2a. Mailing Address

21

26

State Apt. # etc.

State Apt. # etc.

22

27

City & State

City & State

23

28

ZIP

Country

ZIP

Country

24

25

29

30

4. FEI Number
65-0406816

Applied For
Not Applicable

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 has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GUTIERREZ, REINALDO
13453 SOUTHWEST 62ND STREET
STE. 4
MIAMI FL 33183

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

(Signature must be handwritten. They must not be typed or made by computer.)

(Typed Name of Registered Agent or other individual who is not the agent)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D
NAME	GUTIERREZ, REINALDO
STREET ADDRESS	13453 SOUTHWEST 62ND STREET STE. 4
CITY, ST, ZIP	MIAMI FL 33183
TITLE	D
NAME	GUTIERREZ, ZENaida
STREET ADDRESS	13453 SOUTHWEST 62ND STREET STE. 4
CITY, ST, ZIP	MIAMI FL 33183
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

1. TITLE	☐ Change ☐ Addition
1.1 NAME	
1.1 STREET ADDRESS	
1.1 CITY, ST, ZIP	
2. TITLE	☐ Change ☐ Addition
2.1 NAME	
2.1 STREET ADDRESS	
2.1 CITY, ST, ZIP	
3. TITLE	☐ Change ☐ Addition
3.1 NAME	
3.1 STREET ADDRESS	
3.1 CITY, ST, ZIP	
4. TITLE	☐ Change ☐ Addition
4.1 NAME	
4.1 STREET ADDRESS	
4.1 CITY, ST, ZIP	
5. TITLE	☐ Change ☐ Addition
5.1 NAME	
5.1 STREET ADDRESS	
5.1 CITY, ST, ZIP	
6. TITLE	☐ Change ☐ Addition
6.1 NAME	
6.1 STREET ADDRESS	
6.1 CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information included on this 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 this corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 if changed from an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Reinaldo Gutierrez-President 03-24-95 (407)996-4179

DATE

Signature File No. 8