


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

FILED
Apr 08 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morton Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 1. Corporation Name	P 93000043279 (7)
FOODLAND SUPERMARKET NO. 6, INC	

Principal Place of Business	Mailing Address
5715 N.W. 7 St. Miami, FL 33126	same

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
25	30

DO NOT WRITE IN THIS SPACE	
3. Date Incorporated or Qualified 06/18/ 1993	
4. FEI Number 65- 0422896	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent	
Foodland Supermarket NO. 6, INC 5715 N.W. 7 St. Miami, FL 33126	

10. Name and Address of New Registered Agent	
81 Name	Ortelio Marcelo
82 Street Address (P.O. Box Number is Not Acceptable)	5715 N.W. 7 St.
83	
84 City	Miami
85	FL 33126

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: *Ortelio Marcelo* m January 20/98
Signature of registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	
TITLE	NAME
NAME	RODRIGUEZ, FERNANDO
STREET ADDRESS	1720 Country Club Prado
CITY - ST - ZIP	oral GABLES > FL. 33134
TITLE	NAME
NAME	ORTELIO MARCELO
STREET ADDRESS	10400 S.W. 127 Ave.
CITY - ST - ZIP	Miami, FL. 33186
TITLE	NAME
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	NAME
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	NAME
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	Change Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	Change Addition
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	Change Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	Change Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	Change Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	Change Addition
62 NAME	
63 STREET ADDRESS	
64 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)(c), 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: *Ortelio Marcelo* 1/20/98 (705) 266-4647
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (10/97)