

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

PROFIT CORPORATION  
ANNUAL REPORT  
**1996**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mathani  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P93000059749 (0)**

1. Corporation Name  
**C. & R. SUPERMARKET, INC.**



Principal Place of Business: **18201 NORTHWEST 7TH AVENUE MIAMI FL 33169**  
Mailing Address: **18201 NORTHWEST 7TH AVENUE MIAMI FL 33169**

3. Date Incorporated or Qualified <b>08/23/1993</b>	3a. Date of Last Report <b>02/17/1995</b>
4. FEI Number <b>65-0462060</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes. <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. State, Apt. #, etc.	26. State, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent  
**VELOZ, JOSE R  
18201 NORTHWEST 7TH AVENUE  
MIAMI FL 33169**

10. Name and Address of New Registered Agent

81. Name <b>Engels R. Argueta</b>
82. Street Address (P.O. Box Number is Not Acceptable) <b>19010 NW 57 Avenue</b>
83. City <b>Miami</b>
84. State <b>FL</b>
85. Zip Code <b>33015</b>

11. Pursuant to the provisions of Sections 607.1500 and 607.1503, 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 607.1505, Florida Statutes.

SIGNATURE: *Engels R. Argueta* **Owner** DATE: **1/30/95**

12. OFFICERS AND DIRECTORS

1. TITLE <input checked="" type="checkbox"/> DELETE	D VELOZ, JOSE R 20340 NORTHWEST 42ND AVENUE CAROL CITY FL 33055
2. TITLE <input checked="" type="checkbox"/> DELETE	D VELOZ, CARMEN 20340 NORTHWEST 42ND AVENUE CAROL CITY FL 33055
3. TITLE <input type="checkbox"/> DELETE	
4. TITLE <input type="checkbox"/> DELETE	
5. TITLE <input type="checkbox"/> DELETE	
6. TITLE <input type="checkbox"/> DELETE	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	Director
2. NAME	Engels R. Argueta
3. STREET ADDRESS	19010 NW 57 Avenue
4. CITY - ST - ZIP	Miami, FL 33015
5. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
6. NAME	
7. STREET ADDRESS	
8. CITY - ST - ZIP	
9. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
10. NAME	
11. STREET ADDRESS	
12. CITY - ST - ZIP	
13. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
14. NAME	
15. STREET ADDRESS	
16. CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 I am signed, or on an affidavit with an address.

SIGNATURE: *Engels R. Argueta* DATE: **1/30/95** **652-7753**

CR2E034 (12/95)