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Apr 18 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P94000018924 (8)

1. Corporation Name
LEJEUNE FOOD MART, INC.



Principal Place of Business: 2501 EAST 8TH AVENUE, HIALEAH FL 33013
Mailing Address: 2581 EAST 8TH AVENUE, HIALEAH FL 33013-3449

3. Date Incorporated or Qualified: 03/07/1994
3a. Date of Last Report: 05/01/1996
4. FEI Number: 65-0469443
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

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

9. Name and Address of Current Registered Agent
GUEVARA, JOSEPHINE
2581 EAST 8TH AVENUE
HIALEAH FL 33013

10. Name and Address of New Registered Agent
81 Name: YOUSIF, Mahir W.
82 Street Address (P.O. Box Number is Not Acceptable): 2581 East 8th Ave
83
84 City: Hialeah FL 85 Zip Code: 33013

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] January 2, 1997
Signature, typed or printed name of registered agent and title if applicable (NOTE: Reg. stored Agent signature required when re-registering) DATE

12. OFFICERS AND DIRECTORS

TITLE	D	DELETED
NAME	GUEVARA, JOSEPHINE	
STREET ADDRESS	2581 EAST 8TH AVENUE	
CITY-ST-ZIP	HIALEAH FL 33013	
TITLE	D	DELETED
NAME	RAWDA CHOUEIKI	
STREET ADDRESS	2581 EAST 8TH AVE	
CITY-ST-ZIP	HIALEAH FL	
TITLE	D	DELETED
NAME	YOUSIF, MAHIR W.	
STREET ADDRESS	2581 EAST 8TH AVE	
CITY-ST-ZIP	HIALEAH FL	
TITLE		DELETED
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETED
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	49 % of Shares
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	51% of Shares
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: [Signature] 305-693-1811

CR2E034 (9/96)