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Jan 31 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 # P94000043202 (8)

1. Corporation Name
PETER PAUL GROCERIES CORP.

Principal Place of Business
2805 SW 31ST AVE
SUITE 6
PEMBROKE PARK FL 33009
US

Mailing Address
P O BOX 221
SUITE 6
DANIA FL 33004-0221
US



3. Date Incorporated or Qualified 06/09/1994
3a. Date of Last Report 02/28/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 DELETE SUITE 6
City & State

27 DELETE SUITE 6
City & State

23 Zip Country

28 Zip Country

24 Zip Country

29 Zip Country

4. FEI Number 65-0562593
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

FEINBERG, JEFFREY
4651 SHERIDAN STREET
SUITE 300
HOLLYWOOD FL 33021

Address
changes

81 Name Jeffrey Feinberg
82 Street Address (P.O. Box Number is Not Acceptable) 4000 HOLLYWOOD BLVD Ste 350
83 North Tower
84 City Hollywood FL 85 Zip Code 33021

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

12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	11 TITLE	12 NAME
PV	PUSKADI, PAUL	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
2805 SW 31ST AVE		13 STREET ADDRESS	
PEMBROKE PARK FL		14 CITY - ST - ZIP	33009
<input type="checkbox"/> DELETE		21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		22 NAME	
		23 STREET ADDRESS	
		24 CITY - ST - ZIP	
<input type="checkbox"/> DELETE		31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		32 NAME	
		33 STREET ADDRESS	
		34 CITY - ST - ZIP	
<input type="checkbox"/> DELETE		41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		42 NAME	
		43 STREET ADDRESS	
		44 CITY - ST - ZIP	
<input type="checkbox"/> DELETE		51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		52 NAME	
		53 STREET ADDRESS	
		54 CITY - ST - ZIP	
<input type="checkbox"/> DELETE		61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		62 NAME	
		63 STREET ADDRESS	
		64 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: _____ PAUL PUSKADI 1/25/97 (954) 989-8530
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)