SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #
1. Corporation Name

P94000058950 (4)

FILED Sep 24 1998 8:00am Secretary of State

CYPRES	SS FOOD STORE, INC.	` ,		
Principal Plac	ce of Bus iness	Mailing Address		
101 SE SIXTH POMPANO BEA		101 SE SIXTH AVE #10 POMPANO BEACH FL 3306	0	DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
1	ace of Business AVE #10 OH FL 33000 101 SE SIXTH AVE #10 POMPANO BEACH FL 33060 102 Suite, Apt. #, etc. 203 21 City & State 22 Country 25 29 30 9. Name and Address of Current Registered Agent M, SERAJUL SE SIXTH AVE #10 PANO BEACH FL 33060 83 84 Cothe provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-nar egistered agent, or both, in the State of Florida. Such change was authorized by the machinal and social statutes. Signalum, typed or printed name of registered agent and the if applicable. OFFICERS AND DIRECTORS D SIXTH AVE #10 POMPANO BEACH FL 33060 OFFICERS AND DIRECTORS D DELETE 111111E 12 NAME 23 SIREET ADD 24 CITYST-2IP 10 DELETE 111711E 22 NAME 33 SIREET ADD 34 CITYST-2IP 10 DELETE 51 TITLE 52 NAME 5.3 SIREET ADD 44 CITYST-2IP 10 DELETE 51 TITLE 52 NAME 5.3 SIREET ADD 53 SIREET ADD 54 CITYST-2IP 11111E 52 NAME			08/10/1994
2. Principal F	Place of Business	2a. Malling Address		4. FEI Number Applied For
21		26		65-0514171 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		\$8.75 Additional
22		27		5. Certificate of Status Desired Fee Required
City & State		<u></u>		6. Election Campaign Financing \$5.00 May Be
23				Trust Fund Contribution Added to Fees
Zip	<u>⊢</u> .	<u>-</u>		8. This corporation owes or has paid the current year Intangible
24			30]	Personal Property Tax due June 30. Yes No
IOI A		ent Registered Agent	81 Name	10. Name and Address of New Registered Agent
			VI Name	
			82 Street Add	dress (P.O. Box Number is Not Acceptable)
PUN	PANU BEACH FL 33060		83	
i				
İ			84 City	FL 85 Zip Code
11. Pursuan	t to the provisions of sections 607.05	in2 and 607 1508. Florida Statutas	the shove named corn	
office or	registered agent, or both, in the Sta	te of Florida. Such change was a	uthorized by the corporat	tion's board of directors. I hereby accept the appointment as registered
agent. 1	am ramiliar with, and accept the obli	igations of, section 607.0505, Flo-	rida Statutes.	
SIGNATURE	Signalure, typed or printed name of registered as	gent and title if applicable. (NO)	E: Registered Agent signature rec	guired when reinstating) DATE
12.	OFFICERS A			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	l 	DELETE	1.1 TITLE	Change Addition
NAME			1.2 NAME	_ • _
STREET ADDRESS			1.3 STREET ADDRESS	
CITY-ST-ZIP	POMPANO BEACH FL 33060		1.4 CITY-ST-ZIP	
TITLE		L DELETE	2.1 TITLE	Change Addition
NAME			2.2 NAME	
STREET ADDRESS			2 3 STREET ADDRESS	
CITY-ST-ZIP				
TITLE		L] DELETE		Change Addition
NAME				
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP TITLE		<u> </u>	4	
NAME		L_J DELETÉ		L_I Change Addition
STREET ADDRESS				
CITY-ST-ZIP				•
TITLE		DELETE		
NAME		CTI DECELE	l i	Change Addition
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP				
TITLE		Delete		Channe Ladden
NAME		Detric		Change Addition
STREET ADDRESS			B.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	
	rtify that the information supplied will	h this filing does not qualify for the		tion 110 07/21/i) Florido Ctatudos I fuelhas codife that the lafe and

I 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 a larged, or on an attachment with an address.

SIGNATURE & DOON

RESPONDENT TO LAND

8/211 D 9-954 9/12-100

E034 (5/98)