

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000076851 (2)

1. Corporation Name

R & R FOOD STORES, INC.



Principal Place of Business

5980 W. GULF TO LAKE HIGHWAY
CRYSTAL RIVER FL 34429

Mailing Address

5980 W. GULF TO LAKE HIGHWAY
CRYSTAL RIVER FL 34429

2. Principal Place of Business

21

State, Apt. #, etc.

22

City & State

23

Zip Country

24

25

2a. Mailing Address

26

State, Apt. #, etc.

27

City & State

28

Zip Country

29

30

9. Name and Address of Current Registered Agent

REDDY, TUMU P
571 W. BRITAIN ST.
HERNANDO FL 34442

3. Date Incorporated or Qualified

10/17/1994

3a. Date of Last Report

04/21/1995

4. FET Number

59-3274842

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. 198.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0501 and 607.0505, Florida Statutes, the above named corporation hereby certifies that the person 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: *Tumu Reddy*

Signature of the person for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

DATE

12. OFFICERS AND DIRECTORS

1. TITLE ☐ DELETE

NAME
D REDDY, TUMU P
STREET ADDRESS
571 W. BRITAIN STREET
CITY, ST, ZIP
HERNANDO FL 34442

2. TITLE ☐ DELETE

NAME
D RAO, V U
STREET ADDRESS
P.O. BOX 1288 N/A
CITY, ST, ZIP
CRYSTAL RIVER FL 34423

3. TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY, ST, ZIP

4. TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY, ST, ZIP

5. TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY, ST, ZIP

6. TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY, ST, ZIP

13.

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY, ST, ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY, ST, ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY, ST, ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY, ST, ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY, ST, ZIP

25. TITLE

26. NAME

27. STREET ADDRESS

28. CITY, ST, ZIP

29. TITLE

30. NAME

31. STREET ADDRESS

32. CITY, ST, ZIP

33. TITLE

34. NAME

35. STREET ADDRESS

36. CITY, ST, ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is true, accurate, and does not qualify for the exemption stated in Section 119.07(3)(g), 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 person or persons 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 a certificate with an address.

SIGNATURE: *Tumu Reddy* TUMU REDDY
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-10-96

352-563-2410

CR2E034 (12/95)