## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT **CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Corporation	MENT # P9400 FOOD STORES, INC.	0076851 (2)			
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		DO NOT WRITE IN THIS	
				3. Date Incorporated or Qualified 10/17/1994	. <u>-</u>
	lace of Business	2a. Mailing Address	-	4. FEI Number	Applied For
21	H	26		59-3274842	Not Applicable
Suite, Apt.	<b>#,</b> €1C.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	9	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the cur	
24	25	29	30		Yes No
	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New Registered	Agent
	DDY, TUMU P		81 Name		
571 W. BRITAIN ST.			82 Street Ad	Idress (P.O. Box Number is Not Acceptable)	-
HE	RNANDO FL 34442		83		*···
ļ			64 City	FI	85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statut	les, the above-named co	orporation submits this statement for the purpose of	f changing its registered
office or n	egistered agent, or both, in the Stat m familiar with, and accept the obli	e of Florida. Such change was a gations of, Section 607,0505, Fl	authorized by the corpor orida Statutes.	orporation submits this statement for the purpose o ration's board of directors. I hereby accept the app	ointment as registered
SIGNATURE	I'm Pairly Red	los		3-1	9-98
	Signature, typed or printed name of registered a	gent and title if applicable [NO]	IE: Registered Agent signature red		
12.	- <del>-</del>	ND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12  Change Addition
TITLE	D DENOV TUBELD	L) DELETE	1.1 TITLE		Cuantie T Vocinion
STREET ADDRESS	REDDY, TUMU P 571 W. BRITAIN STREET		1.2 NAME 1.3 STREET ADDRESS		
CITY-ST-ZIP	HERNANDO FL 34442		1.4 CITY-ST-ZIP		
TITLE	D	DELETE	2.1 TITLE		Change Addition
NAME	RAO, V U	<del></del>	2.2 NAME		
STREET ADDRESS	P.O. BOX 1288 N/A		2.3 STREET ADDRESS		
CITY-ST-ZIP	CRYSTAL RIVER FL 34423		2.4 CITY - ST - ZIP		
TITLE		DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CiTY-ST-ZIP		L Dri eze	3.4. CITY - ST - ZIP		The state of the s
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		i
STREET ADORESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	44 City-St-ZIP 51 Title		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-\$1-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		•

14. 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 changed, or on an attachment with an address.

CITY-\$1-ZIP

3-19-98 352-563-2410

**FILED** 

May 08 1998 8:00am

Secretary of State