

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 25, 2000 8:00 am
Secretary of State

01-25-2000 90132 019 ***158.75

DOCUMENT # P95000044298

1. Entity Name

GRANDMA ROSIE'S MARKET, INC.

Principal Place of Business

Mailing Address

1925 S. FLAGLER DRIVE
 WEST PALM BEACH FL 33401

1925 S. FLAGLER DRIVE
 WEST PALM BEACH FL 33401-7715

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0587848

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~HEWITT, BERNARD~~ **MICHAEL HEWITT**
 1925 S. FLAGLER DRIVE
 WEST PALM BEACH FL 33401

Name

MICHAEL HEWITT

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

**1925 S. FLAGLER DRIVE
 W. Palm Beach Fl. 33401**

City

W. Palm Beach Fl. FL 33401

Zip Code

33401

8. The above named entity supports this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/19/00

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** Delete
 NAME ~~PEREZ GLORIA~~ **Gloria Hewitt**
 STREET ADDRESS **17582 BOCAIRE WAY**
 CITY-ST-ZIP **BOCA RATON FL 33487**

TITLE Change Additor
 NAME **PROF. GLORIA HEWITT**
 STREET ADDRESS **1925 S FLAGLER DRIVE**
 CITY-ST-ZIP **W. Palm Beach Fl. 33401**

TITLE **V** Delete
 NAME **HEWITT, MICHAEL**
 STREET ADDRESS **17582 BOCAIRE WAY**
 CITY-ST-ZIP **BOCA RATON FL 33487**

TITLE Change Additor
 NAME **U.P. MICHAEL HEWITT**
 STREET ADDRESS **1925 S. FLAGLER DRIVE**
 CITY-ST-ZIP **W. Palm Beach Fl. 33401**

TITLE **STD** Delete
 NAME **HEWITT, BERNARD**
 STREET ADDRESS **17582 BOCAIRE WAY**
 CITY-ST-ZIP **BOCA RATON FL 33487**

TITLE Change Additor
 NAME **MICHAEL HEWITT**
 STREET ADDRESS **1925 S FLAGLER DRIVE**
 CITY-ST-ZIP **W. Palm Beach Fl. 33401**

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Additor
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
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TITLE Change Additor
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address with all other lines empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

SIGNATURE RECORDED

1/19/00 50-659-10