2000 UNIFORM BUSINESS REPORT (UBR) **FILED** Aug 16, 2000 8:00 am Secretary of State DOCUMENT # **P95000055228** LUCY'S FOOD MARKET, INC. 08-16-2000 90004 005 ***150.00 Principal Place of Business Mailing Address 567 W CHURCH ST 567 W CHURCH ST ORLANDO FL 32805 ORLANDO FL 32805 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3384519 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MOON, SHIN S Street Address (P.O. Box Number is Not Acceptable) 567 W CHURCH ST ORLANDO FL 32805 City Zip Code 8. The above named entity submits 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 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min, will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Change ☐ Addition TITI F TITLE ☐ Delete NAME MOON. SHIN S NAME STREET ADDRESS 567 W CHURCH ST STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ORLANDO FL 32805 ☐ Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TIT! F NAME NAME STREET ADDRESS STREET ADDRESS

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 like empowered.

·CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

CITY-ST-7IP

STREET ADDRESS

CITY-ST-7IP

TITLE NAME

REOSHINDS MOON Plos. 8/2/00 407 839-1345

Delete

☐ Change

☐ Addition

LUCY'S FOOD MARKET INC.

PHTCh Mer H pq500055228

DX # Pq500055228

par 19a96

567 W. CHURCH STREET

Phone (407) 839-1345 Fax (407) 839-3996

August 11, 2000

ORLANDO, FL 32805

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

I recently received the second notice of the 2000 Uniform Business Report but I did not receive the first notice. I have always paid this amount on time for the past five years. I wish to pay the original amount without penalty. I have enclosed the 2000 UBR and a check in the amount of \$150.00. Please do not hesitate to call me if there are any problems. I can be reached at 407-839-1345.

Shin S. Moon Lucy's Food Mart, Inc.

enclosures: 2000 UBR Check for 150.00

. .