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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000070220 (5)

LAS VEGAS SUPERMARKET, INC.

Princip	al Place	of Business
A444 A	ANGE 14	101

Mailing Address

FILED Apr 23 1997 8:00am Secretary of State



WEST PALM 8	EACH FL 33405	WEST PALM BEACH FL 3	3405-4408				
					3. Date Incorporated or Qualified 09/08/1995	3a. Date of Last Report 04/23/1996	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	· 1 ··· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·	Applied For	
21		26			65-06 12468	-	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	7	Additional Required
22 City & State	^	City & State					
23					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip	Country	Zip Country			8. This corporation has liability for intangible tax under s. 199.032,		
24	25	29	30				
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Re	gistered Agent	
	IIZARES, GUILLERMO		8	1 Name			
6605 S DIXIE HWY WEST PALM BEACH FL 33405			82 Stre		Address (P.O. Box Number is Not Acceptable)		
	or them benott to do to		8	3			
			8-	1 City		FL 85 Zij	p Code
44 Digouant	to the provinces of Postions CO7 DEDO	and CO7 15 OO Florida State	so the she	us named as	proportion a despite this statement for the	. —	No sociological
office or r	egistered agent, or both, in the State of	f Florida. Such change was a	es, the abo authorized t	by the corpo	orporation submits this statement for the pration's board of directors. I hereby accep	of the appointment a	as registered
	m familiar with, and accept the obligat	ions of, Section 607.0505, Fig	orida Statuti	98.			
SIGNATURE	Signature, typed or printed name of registered agent	and title (applicable. (NOT)	C: Hegistered A	nent signature rec	quired when reinstating)	DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC		DRS IN 12
TITLE	D	DELETE	1.1 TITLE			Change	Addition
NAME	CANIZARES, GUILLERMO		1.2 NAME	: [ţ
STREET ADDRESS	6600 LYTLE CT		1.3 STRE	ET ADDRESS			
CITY-ST-ZIP	WEST PALM BEACH FL 33405		1.4 CITY-	-ST-7/P			
TITLE	D	DELETE	2.1 1ITLE			Change	Addition
NAME	Canizares, Xonia		2.2 NAME	. [į
STREET ADDRESS	6600 LYTLE CT		2.3 STRE	1 ADDRESS			
CITY-ST-ZIP	WEST PALM BEACH FL 33405	1.17	2 4 CITY	- S1 - ZIP			
TITLE		☐ DELETE	3.1 TITLE			Change	Addition
NAME			3.2 NAME				ļ
STREET ADDRESS			3 3 STRE	ET ADDRESS			
CITY-ST-ZIP			3 4. CITY	-SI-ZIP			
TITLE		DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAM	1			
STREET ADDRESS			4.3 STRE	T ADDRESS			
CITY-ST-ZIP			4.4 CITY-				
TITLE		DELETE	5 1 TITLE	1		Change	e Addition
NAME			5.2 NAME	1			
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP		T Severe	5.4 CI1Y			FT	
TITLE		☐ DELETE	6.1 TITLE	ļ		Change	e 🔲 Addilion
NAME			6.2 NAM	i i			
STREET ADDRESS			6.3 STRE	ET ADDRESS			
CITY-ST-ZIP			64 CITY	ST-7IP			

I do 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 logal effect as if made under eath; 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.

4-10-97