

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

FILED
May 07, 1999 8:00 am
Secretary of State

05-07-1999 90044 035 ***150.00



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

PROFIT CORPORATION
 ANNUAL REPORT
1999

DOCUMENT # P95000073553

1. Corporation Name
VALENCIA FOOD STORES, INC.



Principal Place of Business
 1150 E. HALLANDALE BEACH BLVD.
 SUITE A
 HALLANDALE FL 33009

Mailing Address
 7345 SAND LAKE RD
 STE 412
 ORLANDO FL 32819
 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
09/22/1995

4. FEI Number
65-0613552

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 owes the current year Intangible Personal Property Tax. Yes No

2. Principal Place of Business
 21 **2996 NW 55th AVE**

2a. Mailing Address
 26 Suite, Apt. #, etc.

22 City & State
LAUDERHILL FL

23 Zip Country
33313

9. Name and Address of Current Registered Agent

OSHINSKY, LEONARD ESQUIRE
 1150 E. HALLANDALE BEACH BLVD.
 SUITE A
 HALLANDALE FL 33009

10. Name and Address of New Registered Agent

81 Name **DAVID PORTLOCK**
40 DOWNTOWN BUSINESS SERVICES

82 Street Address (P.O. Box Number is Not Acceptable)
7345 SAND LAKE RD STE 412

83 **0**

84 City **ORLANDO** FL 85 Zip Code **32819**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement 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 **DAVID R. PORTLOCK** DATE **4/21/99**

12. OFFICERS AND DIRECTORS

| | | |
|----------------|-------------------------------|---------------------------------|
| TITLE | P | <input type="checkbox"/> DELETE |
| NAME | SHEHADEH, MARWAN | |
| STREET ADDRESS | 3711 CORAL TREE CIRCLE | |
| CITY-ST-ZIP | COCONUT CREEK FL | |
| TITLE | | <input type="checkbox"/> DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | | |
|--------------------|------------------------------------|--|
| 1.1 TITLE | P | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME | SHEHADEH MARWAN | |
| 1.3 STREET ADDRESS | 4151 CORAL TREE CIRCLE #251 | |
| 1.4 CITY-ST-ZIP | COCONUT CREEK FL 33073 | |
| 2.1 TITLE | D | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 2.2 NAME | NIDAL ABDELLATIE | |
| 2.3 STREET ADDRESS | 568 NW 130th WAY | |
| 2.4 CITY-ST-ZIP | PETROBROKE PINES FL 33028 | |
| 3.1 TITLE | D | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 3.2 NAME | SHIHADEH MOHAMMED | |
| 3.3 STREET ADDRESS | 3711 CORAL TREE CIRCLE | |
| 3.4 CITY-ST-ZIP | COCONUT CREEK FL 33073 | |
| 4.1 TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.2 NAME | | |
| 4.3 STREET ADDRESS | | |
| 4.4 CITY-ST-ZIP | | |
| 5.1 TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 5.2 NAME | | |
| 5.3 STREET ADDRESS | | |
| 5.4 CITY-ST-ZIP | | |
| 6.1 TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 6.2 NAME | | |
| 6.3 STREET ADDRESS | | |
| 6.4 CITY-ST-ZIP | | |

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 in an attachment with an address, with all other like empowered.

SIGNATURE: **[Signature]** DATE **4/15/99**

CR2E034 (11/98)