

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

FILED
Mar 24, 1999 8:00 am
Secretary of State

03-24-1999 90030 024 ***150.00

PROFIT CORPORATION
 ANNUAL REPORT
1999



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

DOCUMENT # **P96000073572**

1. Corporation Name
ROSIE'S MARKET AND DELI, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business
**362 PERIWINKLE WAY
 SANIBEL FL 33957**

Mailing Address
**362 PERIWINKLE WAY
 SANIBEL FL 33957**

3. Date Incorporated or Qualified
09/05/1996

4. FEI Number
65-0691176 Applied For Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required *

6. Election Campaign Financing **\$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 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip 28 Zip

24 Country 25 Country 29 Country 30 Country

9. Name and Address of Current Registered Agent

**SZUMLANSKI, BARRY E.
 1487 SANDCASTLE ROAD
 SANIBEL FL 33957**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

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 _____ DATE _____
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	PVS	<input type="checkbox"/> DELETE
NAME	SZUMLANSKI, BARRY E.	
STREET ADDRESS	1487 SANDCASTLE ROAD	
CITY-ST-ZIP	SANIBEL FL 33957	
TITLE	T	<input type="checkbox"/> DELETE
NAME	SZUMLANSKI, MICHAEL A	
STREET ADDRESS	362 PERIWINKLE WAY	
CITY-ST-ZIP	SANIBEL FL 33957	
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	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Szumanski, Michal A
2.3 STREET ADDRESS	1487 Sandcastle Road
2.4 CITY-ST-ZIP	Sanibel, FL 33957
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
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 on an attachment with an address, with all other like empowered.

SIGNATURE: _____ DATE: **3-2-99** DAYTIME PHONE #: **941-472-9159**

CR2E034 (11/98)