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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000079617 (2)

EL GUERO GROCERY, INC.

FILED May 06 1998 8:00am Secretary of State



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Principal Place of Business Mailing Address							- 1 10011001 110 IDITO DIVIT BEIN BOIN GOIN GOIN	#10 18118 B1181	ICENT TOUR TOUR	
6222 JOHNSON ST HOLLYWOOD FL 33024 HOLLYWOOD FL 33024										
								DO NOT WRITE IN THIS	SPACE	
								 Date incorporated or Qualified 09/24/1996 		
2. Principal Place of Business 2s. Mailing Address			ailing Address					4. FEI Number	I A	Applied For
21	26						65-0703797		lot Applicable	
22 27			ulte, Apt. #, etc.					5. Certificate of Status Desired		Additional Required
City & State	<u> </u>	City & State					Election Campaign Financing Trust Fund Contribution		May Be	
Zip Country			Zip Cou			ntry		8. This corporation owes or has paid the cu		
24 25 29				30				Personal Property Tax due June 30. Yes No		
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent			Agent	
BARRANTES, TERESA					81	81 Name				
6000 SW 39TH CT					82 Street Addr			ess (P.O. Box Number is Not Acceptable)		
DAVIE FL 33314										
					83	L				
i					84	' '	City	´ FI	85 Zip	Code
	provisions of Sections 607.0 fred agent, or both, in the Sta iliar with, and accept the ob-	502 and 607. ate of Florida ligations of, S	1508, Florida Statu Such change was ection 607.0505, F	ites, th autho Iorida	ne abov orized b Statute	/e-r y ti	named corpo ne corporatio	oration submits this statement for the purpose on's board of directors. I hereby accept the ap		its registered s registered
SIGNATURE Signatur	re typed or printed name of registered.	agent and little if ag	plicable (NO	TE Rep	Istered Ac	ent:	aignature required	d when reinstating) DATE		
12.		ND DIRECTO			13.	,	•	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	RS IN 12
TITLE D			DELETE		1.1 TITLE				☐ Change	Addition
	UKLERMO, SALAZAR				1.2 NAME					i
	222 JOHNSON ST			- 1	1.3 STREE	T AD	DRESS			
	OLLYWOOD FL				1.4 CITY-	ST-	7IP			
TITLE			☐ DELETE		2.1 TITLE				Change	Addition
NAME					2 2 NAME					
STREET ADDRESS					2.3 STREE	TAD	DRESS			
CITY-ST-ZIP				*****	2. 4 CITY -	ST۰	ZIP			
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STREET ADDRESS					3.3 STREE					
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NAME			□ becele		4 1 TITLE				☐ Change	Addition
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1					4.3 STREET		1			
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NAME					6.2 NAME				onange	- Magadan
				•	6.3 STREET		npecc			
CITY-ST-ZIP					6.4 CITY - 9		- 1			

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.