

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

0053172

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE  
 Sandra B. Mortham  
 Secretary of State  
 DIVISION OF CORPORATIONS

**FILED**

98 AUG -3 AM 11:56

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA



DOCUMENT # P96000081965 (1)  
 1. Corporation Name  
 AVENTURA FOOD MART, INC.

Principal Place of Business: 19100 W DIXIE HWY, NORTH MIAMI BEACH FL 33180 US  
 Mailing Address: 19100 W DIXIE HWY, NORTH MIAMI BEACH FL 33180 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields.

3. Date Incorporated or Qualified: 10/03/1996  
 4. FEI Number: 65-0714951  
 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 or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent  
 BASHIR, ABDUL R  
 19100 W DIXIE HWY  
 NORTH MIAMI BEACH FL 33180

10. Name and Address of New Registered Agent (81-85) fields.

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	P	DELETE
NAME	BASHIR, ABDUL R	
STREET ADDRESS	19100 W DIXIE HWY	
CITY-ST-ZIP	NORTH MIAMI BEACH FL	
TITLE	SVP	DELETE
NAME	BASHIR, MARTHA R	
STREET ADDRESS	19100 W DIXIE HWY	
CITY-ST-ZIP	NORTH MIAMI BEACH FL	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Change	Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	Change	Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	Change	Addition
3.2 NAME		
3.3 STREET ADDRESS	800002609648-9	
3.4 CITY-ST-ZIP	-08/06/98-01070-001	
	***150.00	***150.00
4.1 TITLE	Change	Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	Change	Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	Change	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)(4), 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.

SIGNATURE \_\_\_\_\_

CR2E034 (5/98)

**DRU D. LASHBROOK & ASSOCIATES, P.A.**  
**CERTIFIED PUBLIC ACCOUNTANTS**

*Member of the  
Florida Institute of  
Certified Public Accountants*

Dru D. Lashbrook, CPA  
Brian H. Wollard, CPA

4481 Stirling Road  
Fort Lauderdale, Florida 33314  
Telephone: (954) 581-8112  
Fax: (954) 581-2554

July 27, 1998

Division of Corporations  
P O Box 6327  
Tallahassee, Florida 32314

Re: Aventura Food Mart, Inc.  
65-0714951

To Whom It May Concern:

The above taxpayer had sent his annual report in a timely manner. For some unknown reason the state did not show his on file. He contacted the state and was advised to send it in with a letter (see attached), and it would be accepted and the penalty would be waived. In error the taxpayer sent the request to PO Box 1500, and it was returned and not filed. This office contacted the state today and was advised to send it back to this address. Please waive the penalty and accept this renewal, for just cause. This taxpayer is a new corporation and he has tried to follow the correct procedure.

Should you have any questions, give this office a call.

Sincerely,

  
Brian H. Wollard, CPA

BHW/jr

Enclosure