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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000089250 (0)

CIBAO MINI MARKET, INC.

FILED Feb 28 1997 8:00am Secretary of State

3a. Date of Last Report



├ ──1	lace of Business	28, Mailing Address				4. FEI Number	Applied For
21		26	· · · · · · · · · · · · · · · · · · ·				Not Applicable
Suite, Apt	Suite, Apt. #, etc. Suite, Apt. # etc. Suite, Apt. # etc. 27					5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & Stat	U	City & State				6. Election Campaign Financing	\$5.00 May Be
23		28				Trust Fund Contribution	Added to Fees
Zφ	Country	<i>Z</i> ip	Co	untry		8. This corporation has fiability for intangib	e tax under s. 199.032,
				O Florida Statutes Yes No			
Name and Address of Current Registered Agent						10. Name and Address of New Registered	Agent
VARGAS, HAMLET				81	Name		İ
6891 JOHNSON STREET				82	Street Addre	ess (P.O. Box Number is Not Acceptable)	······································
HOLLYWOOD FL							
·				83			
						***************************************	Int 7: Ondo
j				84	City	Fi	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 of registry of 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 Lan tanith with anglicept the duligations of, Section 607.0505, Florida Statutes.							
SIGNATURE	Valor Ro	rit and life I applicable	(NOTE Register	ed Acie	nt signature require	ed when reinstating) DATE	
12.	OFFICERS AN		13.			ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12.
TIFLE	P		ELETE 111	IITLE			A Comment of the Comm
NAME	VARGAS, DANIEL F		1.21	VAME	72	Taxasi Jakasi Bland	إ نام
-STREET ADDRESS	6018 SW 37TH STREET		135	STREET	ADDRESS	405 3W alm Theel	-
CITY ST ZiP	MIRAMAR FL 33023		. 1	DITY-S	- 1 Y	HIRAMOUR FL 3	3023
Filf	V	1227		ITLE		1111CH 110-4- 1 2 2 3	Change Addition
NAME	VARGAS, HAMLET	7		NAME	11,	Luan Will man T	. JE
STREET ADDRESS	6405 SW 20TH STREET				ADDRESS	- SUN. SUR 7	70.0
CITY-51-ZIP	MIRAMAR FL 33023			CITY-S	I I	3737011 7 33	75
.111LF		The state of the s	·····	TITLE	1-11	70114111 10 201	Change Addition
NAME	JIMENEZ, LUIS A			NAME	ì		
-STREET ADDRESS	1060 SW 28TH STREET		I		ADDRESS		
	FORT LAUDERDALE FL 33315						
CHY-ST ZIP	TOTAL BIODENDALE TO COOL			CITY - S TITLE	71-ZIP		Change Addition
		۷ لسبیا		NAME			Circulate Circulation
-NAM€							
STREET ACCIRESS			1		ADDRESS		
.CHY-ST-ZIP				CITY S	T- ZIP		Change Addition
TITLE		L_] L	· ·	TITLE	1		Charge Character
-NAME				NAME			
STREET ADDRESS					ADDRESS		
C(1Y - S1 - ZIP				CITY-S	r-zip		T 65
Tillf	}	<u> </u>	1	TITLE			Change Addition
NAME			6.21	NAME			
STREET ADDRESS			6.3	STREET	ADDRESS		
OTY - ST - ZIP			6.4	CITY-S	T-ZIP		

I do hereby ceruly that the information supplied with this Uling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this amful report or supplemental affinal 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 information or thought or trusting empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in thick 12 or plack 13 or changed, or phylight achieves the anadoress.

SIGNATURE:

MA UNE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/10/87 (954) 894-077