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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # **P96000089535**1. Corporation Name

DANDY MARKET, INC.

Principal Place of Business

Mailing Address

1314 E UNIVERSITY AVE

1314 E UNIVERSITY AVE

FILED Feb 20, 1999 8:00 am Secretary of State

02-20-1999 90066 034 ***150.00



GAINESVILLE FL 32641		GAINESVILLE FL 32641	GAINESVILLE FL 32641		DO NOT WRITE IN THIS SPACE		
				•	3. Date Incorporated or Qualifed 10/30/1996		
2 Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Apr	plied For
21		26	26		59-3408066	Not	t Applicable
Suite, Apt. i	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 A Fee Red	
22	<u> </u>		City & State		6. Election Campaign Financing	\$5.00	May Re
City & State	•				Trust Fund Contribution	Added to	
23	Country	Zip	Coun	trv	8. This corporation owes the current year Ir		
Zip ——	· · · · · · · · · · · · · · · · · · ·		30	,	Personal Property Tax.	Yes	□No
24	25	29 3 Current Registered Agent	30]		10. Name and Address of New Registered	Agent	
	9. Name and Address of	Current Registered Agent	- 1	Name			
9010	OMON, SULEIMAN						
1314 E UNIVERSITY AVE				32 Street Add	dress (P.O. Box Number is Not Acceptable)		
GAINESVILLE FL 32641				33			
GAIN	IESVILLE FL 32041		١,	23			
			.	34 City	FI	85 Zip C	ode
44 6	of Continue C	07 0502 and 607 1508 Florida Statutes	s the ah	ve-named cor	poration submits this statement for the purpose of	of changing its	registered
office or re	egistered agent, or both, in the	State of Florida/Such change was au	thorized	by the corporat	poration submits this statement for the purpose c tion's board of directors. I hereby accept the appo	ointment as reg	jistered
agent. I a	m familiar with, and accept the	obligations of Section 607.0505, Flori	da Statut	es.		, 99	
SIGNATURE	Sullma	- Solomon	Conjutered A	and cionature requir	red when reinstating) DATE	1-99	— I.
	Signature, typed or printed name of regis	ERS AND DIRECTORS	13.	gent signature requi	ADDITIONS/CHANGES TO OFFICERS A		RS IN 12
12.	DP	□ DELETE	1.1 TIL	E		Change	Addition
TITLE			1.2 NAN				
NAME	SOLOMON, SULEIMAN	•		EET ADDRESS			. }
STREET ADDRESS	1314 E UNIVERSITY AVE						·
CITY-ST-ZIP	GAINESVILLE FL 32641	□ DELETE	1,4 CII	/-ST-ZIP		Change	Addition
TITLE		C) Defere				_ ,	_ (
NAME			2.2 NAM		4		-
STREET ADDRESS				EET ADDRESS	•		
CITY-ST-ZIP				Y-ST-ZIP		☐ Change	Addition
TITLE	DELETE 3.1 TI		1			_i	
NAME			3.2 NAM	I .	*		
STREET ADDRESS			3.3 STP	EET ADDRESS			
CITY-ST-ZIP				Y-ST-ZIP		Change	Addition
TITLE		☐ DELETE	4.1 TIT			□ criange	- Addition
NAME			4, 2 NA	ME			
STREET ADDRESS			4.3 STF	REET ADDRESS			Ì
CITY-ST-ZIP			4.4 CIT	Y-ST-ZIP			- Addition
TITLE		☐ DELETE	5.1 TITI	ļ		☐ Change	☐ Addition
NAME			5.2 NA				Į
STREET ADDRESS			5.3 STF	REET ADDRESS			
CITY-ST-ZIP			5.4 CIT	Y-ST-ZIP			
TITLE		☐ DELETE	6.1 TITI	.E		☐ Change	Addition
NAME			6.2 NA	ME		•	
STREET ADDRESS			6.3 STF	REET ADDRESS			
SIKEEI AUDRESS			GA CIT	v et. zip			1

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: