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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000090435 (4)

PUREST FOODS MARKET, INC.

Principal Place of Business

7727 INDIAN RIDGE TR SOUTH

Mailing Address

FILED Feb 27 1998 8:00am Secretary of State



KISSIMMEE FL 34747		KISSIMMEE FL 34747-0034								
					DO NOT	DO NOT WRITE IN THIS SPACE				
						 Date Incorporated or Qu 10/31/1996 	alified			
2. Principal Pi	lace of Business	2a. Mailing A	2a. Mailing Address			4. FEI Number		Ar	plied For	
21 73216	J. Colonial Dr.	26	26			59-3412156		No	t Applicable	
Suite, Apt	#, etc.	Suite, Apl	Suite, Apt. #, etc.			E Continue of Chat - Cont	red 🔲	\$8.75	Additional	
22		27				5. Certificate of Status Desi	red L	Fee Re	quired	
City & State	_	City & Sta	City & State			6. Election Campaign Finar	icing	\$5.00	May Be	
	ndo, FC	28				Trust Fund Contribution		Added 1		
Zip 24 3-28 / 8	Country	7(p	· — ·			8. This corporation owes or	,			
24 3-28 /2		[29]	30	L.,		Personal Property Tax du			No	
14/0	9. Name and Address of Curr	eni Registered Agei	nu	81	Name	10. Name and Address of f	lew Hegistered	Agent		
WRIGHT, DIANA 7727 INDIAN RIDGE TR SOUTH]*'	or Name					
	SIMMEE FL 34747				Street	Address (P.O. Box Number is Not A	ceptable)			
NIO	SIMMEE PL 34/4/			83	ľ					
				03						
				84	City		FL	85 Zip (Code	
11. Purcuant t	to the provisions of Sections 607 (502 and 607 1508 F	orida Statutos, t	the above	nama.	d corneration submits this statement f		l changing it	o sociatorod	
11. Pursuant to the provisions of Sections 607.0502 and 607.0508, 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. Larn familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.										
SIGNATURE Signature. Spend or present make of registered agent and title it applie also (NOTE Registered Agent signature required when reinstating). DATE										
12.	OFFICERS A	NO DIRECTORS		13.		ADDITIONS/CHANGES TO	OFFICERS AND	DIRECTOR	\$ IN 12	
TOTLE	P DIAME		DELETE	1.1 TITLE				Change	☐ Addition	
NAME	WRIGHT, DIANA			1.2 NAME						
STREET ADDRESS	P.O. BOX 470034 (N/A)			1.3 STREET	ADDRESS					
CITY-ST-ZIP	KISSIMMEE FL 34747-0034	···-			1 - ZIP					
TITLE			DELETE	2.1 TOLE		1		Change	Addition	
NAME				2.2 NAME						
STREET ADDRESS				2.3 STREET	address					
CITY-ST-ZIP	*				ST-ZIP		·····		1 1 1 100	
TITLE		LJ	DITEIL	3.1 TITLE				Change	Addition	
NAME				3.2 NAME				•		
STREET ADDRESS				3.3 STREET						
CITY-ST-ZIP		· ·- · · · · · 	DELETE	3.4. CITY-5	ST-ZIP		·	Change	Addition	
NAME			DELLT	4.1 TITLE				Griange	LI AGOIIIOI	
i			l l	4.2 NAME	40000000					
STREET ADDRESS				4.3 STREET						
CITY-ST-ZIP TITLE			DELETE	4.4 CITY - S 5.1 TITLE	1 - ZIP	 		Change	Addition	
NAME		L 1		52 NAME				C Orango		
STREET ADDRESS			1	53 STREET	ADDRESS					
CITY-ST-ZIP						Į.				
TITLE				54 CITY - S 61 TITLE	1-211	+		Change	Addition	
NAME				62 NAME		1				
STREET ADDRESS				6.3 STREET	Athopsec	1				
CITY-ST-ZIP										
	astifuthat the information our died		at avalle for the	64 DITY-S	1-212	L				

Indicated on this annual reports or supplied with this hing does not quality 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.

SIGNATURE:

Mainte Jet

DIANA WRIGHT

2/18/98

407-522-9161