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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # **P97000019371**1. Corporation Name

SANTANA'S MARKET, INC.

FILED Feb 17, 1999 8:00am **Secretary of State**

02-17-1999 90088 029 ***150.00



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Principal Place of Business Mailing Address								E:: 88411 88111 48111 8818		r readi mar sedi
1830 NW 17TH AVENUE 1830 NW 17TH AVENUE			TH AVENUE					•		
MIAMI FL 3312	5	MIAMI FL 33	MIAMI FL 33125				DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or			` ` ` ` ` `
							03/03/1997			{
2. Principal P	lace of Business	2a. Mailing	Address				4, FEI Number		A	pplied For
21		26					65-0796376		N	ot Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				5. Certifcate of Status De	esired		Additional equired
City & State	e	City & S	State				6. Election Campaign Fit	nancing	\$5.00	May Be
23		28					Trust Fund Contribution	on		to Fees
Zip	Country	Zip	-	Coun	try		8. This corporation owes	the current year in	tangible	_
24	25	29		30			Personal Property Tax		Yes	□No
	9. Name and Address of Co	urrent Registered Ag	ent				10. Name and Address	of New Registered	Agent	
SAN	TANA VIRGILIO I				B1 N	Name				
SANTANA, VIRGILIO J 1401 NW 23RD ST.					82 Street Add		ddress (P.O. Box Number is Not Acceptable)			
	MI FL	•		١.	B3				1 4 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	1.50. 3
(THE SI	711 F E			'	53					
				1	84 (City		FI	85 Zip	Code
44 Durawant	to the provisions of Sections 607	7 0502 and 607 1509	Elorida Statuta	e the abo	0140 D	amed cornor	ration cubmits this statemen	ot for the number of	changing its	registered
office or r	egistered agent, or both, in the S m familiar with, and accept the o	State of Florida, Such of	change was au	thorized	by the	e corporation	's board of directors. I here	by accept the appo	intment as r	egistered
SIGNATURE										
	Signature, typed or printed name of registers	ad agent and title if applicable	41075				Annual Control of the			
			(NOTE:		gent sig	gnature required v		DATE		
12.	OFFICER	S AND DIRECTORS		13.		gnature required v	ADDITIONS/CHANGES			
12.	OFFICER D	S AND DIRECTORS	DELETE	13. 1.1 TML	E	gnature required v			ND DIRECTO	ORS IN 12
12. TITLE NAME	D SANTANA, VIRGILIO J	S AND DIRECTORS		13. 1.1 TITL 1.2 NAM	E IE		ADDITIONS/CHANGES			
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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: