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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000000792 (4) GARDNER'S SUPER MARKETS, INC. # \\

FILED
May 13 1998 8:00am
Secretary of State

Priminal Place of Business 651 Brickell Key Drive C/O LAWRENCE M. POLUCHA. ESO. 1946 TYLER STREET HOLLYWOOD FL 33022-2088 US		:SO.	DO NOT WRITE IN THE		
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
21	26		65-0774074	Not Applicable	
Suite, Apt. W. etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip Country 25	29 30	untry	 This corporation owes or has paid the operational Property Tax due June 30. 	Yes No	
g, Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
PLOUCHA, LAWRENCE M. ES ATKINSON, DINER, STONE & MANKUTA, P. 1948 TYLER STREET HOLLYWOOD FL 33022		81 Name	MILLEUCE M. BOTIX	ta	
			s (P.O. Box Number is Not Acceptable)		
			wood, FL		
		84 City /	F	L 85 Zip Code 330 るシ	
11. Pursuant to the provisions of Sections 607 0502	and 607 1508 Florida Stelutes, the a	have-named coroor	ation submits this statement for the purpose	of changing its registered	

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	Signature, typed or printed name of registered agent and little if a	pplicable (NOTE	Registered Agent signature rec	guired when reinstating)	DATE
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12
TITLE	STDV	DELETE	1.1 TETLE		Change Addition
NAME	adams, Elizabeth		1.2 NAME		•
STREET ADDRESS	9351 SW 56TH ST		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP		
TITLE	96-	DELETE	2.1 TITLE		Change Addition
NAME	GARDNER-JR,-H-A-		2.2 NAME		
STREET ADDRESS	\$051- \$W- 5 \$TH- \$ T		2.3 STREET ADDRESS		
CITY-ST-ZIP	MAM, FL-O		2.4 CITY-ST-ZIP		
TITLE	DP -	DELETE	3.1 TITLE		Change Addition
NAME	ADAMS, MAURICE		3.2 NAME		
STREET ADDRESS	9351 SW 56TH ST		3.3 STREET ADDRESS		
CITY-ST-ZIP	MAMIFL		3.4. CITY-ST-ZIP		•
TITLE	U	☐ DELETE	4.1 TITLE		Change Addition
NAME	GARDNER, J T		4. 2 NAME		
STREET ADDRESS	9351 SW 56TH ST		4.3 STREET ADDRESS		i
CITY - ST - ZIP	MIAM FL		4.4 CITY-ST-ZIP		ı
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		45
STREET ADDRESS			5.3 STREET ADDRESS		7
CITY-ST-ZIP			5.4 CITY-ST-ZIP		5.13
TITLE		DELETE	6.1 TITLE	200002522 -05/14/9801012-	Change Addition
NAME			6.2 NAME	-05/14/9801012-	139 i
STREET ADDRESS			6.3 STREET ADDRESS	***150.00	
OUT V 67 140			CARITY OF TIP	ատա Է ՊՄ Է ՄՄ	

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 chapted or on an attachment with an address.

CIONATURE.

1170100

305-271-721