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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000076270 (2)

Country

9. Name and Address of Current Registered Agent

25

DUKE'S GROCERY, INC.

Principal Place of Business RT 2 BOX 376-A HAVANA FL 32333

2. Principal Place of Business

Sulte, Apt. #, etc.

City & State

21

22

23

24

Zip

Mailing Address

RT 2 BOX 376-A HAVANA FL 32333

2a. Mailing Address

City & State

Zio

Suite, Apt. #, etc.

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FILED May 13 1998 8:00am Secretary of State

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

∏ No

Yes

Not Applicable



8. This corporation owes or has paid the current year Intangible

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified

09/03/1997

6. Election Campaign Financing

Personal Property Tax due June 30.

We Elilad

10. Name and Address of New Registered Agent

Trust Fund Contribution

RT 2 BOX 376-A HAVANA FL 32333		82	82 Street Address (P.O. Box Number is Not Acceptable)		
TO/	WANA PL 32333	83			
		84	City	■ . 85 Zip Code	
			City	FL 63 Zip code	
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statules, 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. Elevida Statutes.					
SIGNATURE Signature by act or printed nature of regulariod agent and till of applicable (NOTE: Registered Agent signature regulated when reinstating) DATE On the printed part of the part of the printed part of the printed part of the printed part of the part o					
12.	Signature by out or printed name of regulated agent and title if applicable (NOTE Registers OFFICERS AND DIRECTORS 13.	o Agen	1 Signature	required when roinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D DELETE 1.11	ITLE		Change Addition	
NAME	DUKE, JENA 12.8	AME			
STREET ADDRESS	POT A DOM AND A	TREET A	ADDRESS		
CITY-ST-ZIP	MAYANA EL 00000	ary-st	- ZIP]	
TITLE	DELETE 2.17			Change Addition	
NAME	22 M	IAME			
STREET ADDRESS	238	TREET A	ADDRESS		
CITY-ST-ZIP	2 41	CIT <u>Y-S1</u>	í-ZIP		
TITLE	DELETE 3.1 T	ITLE		Change Addition	
NAME	32)	LAME			
STREET ADDRESS	333	TREET A	ADORESS		
CITY-ST-ZIP	3.4.	CIT <u>Y-</u> \$1	-ZIP		
TITLE	☐ DELETE 4.1 T	ITLE		Change Addition	
NAME	4.21	NAME			
STREET ADDRESS	4.3.5	TREET	ADDRESS		
CITY-ST-ZIP		ITY-ST	-ZIP		
TITLE	DELETE 5.1 T	ITŁE		☐ Change ☐ Addition	
NAME	5.2 M	IAME			
STREET ADDRESS	5.3 S	TREET A	ADDRESS		
CITY-ST-ZIP		ITY-ST	-ZiP		
TITLE	DELETE 6.1 T	ITLE		Change Addition	
NAME	. 6.2 N	IAME			
STREET ADDRESS	6.3 S	TREET A	ADDRESS		
CITY-ST-ZIP		ITY-ST		1 0 do 40 07/0/0 50 do 00 do 10 do 1	
14. Thereby 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 of 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 for on an attachment with an address.					

Country

81 Name

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