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

PROFIT CORPORATION **ANNUAL REPORT** 1998

NAME

TITLE

NAME STREET ADDRESS

TITLE NAME

TREET ADDRESS UTTY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000100927 (7) **DOCUMENT** #

MERCADITO NICARAGUENSE, INC.

Principal Place of Business Mailing Address 10404 W FLAGLER STREET 10404 W FLAGLER STREET MODULO 12 MODULO 12 DO NOT WRITE IN THIS SPACE MIAMI FL 33174 MIAMI FL 33174 3. Date Incorporated or Qualified 12/01/1997 2a. Mailing Address 4. FEI Number 2. Principal Place of Business Applied For 65-0798029 21 26 Not Applicable Suite, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Ζip Country Country Zip 8. This corporation owes or has paid the current year Intaggible Personal Property Tax due June 30. ☐ Yes 29 24 25 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ZELAYA, NENA CARRION 10404 W FLAGLER STREET Street Address (P.O. Box Number is Not Acceptable) MODULO 12 **B3** MIAM FL 33174 Zip Code 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. ☐ DELETE TITLE 1.1 TITLE ☐ Change ■ Addition ZELAYA, NENA CARRION NAME 1.2 NAME 524 SW 96TH COURT STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33174** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE MAYORGA, NORMAN MANUEL NAME 2.2 NAME 524 SW 96TH COURT STREET ADDRESS 2.3 STREET ADDRESS **MIAMI FL 33174** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE ☐ Change Addition TITLE 3.1 TITLE

CITY-ST-ZIF 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 chapter 607, or on an attachment with an address.

3.2 NAME 3.3 STREET ADDRESS

4.1 TITLE 4. 2 NAME

51 TITLE

52 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

3.4. CITY - ST - 2IP

4 3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

04-19-90

Change

Change

Change

Addition

Addition

Addition

FILED

May 14 1998 8:00am

Secretary of State