

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P97000102773

1. Corporation Name  
LA FAVORITA MARKET, INC.

Principal Place of Business

2148 NW 17 AVENUE  
MIAMI FL 33142

Mailing Address

2148 NW 17 AVENUE  
MIAMI FL 33142

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

MUSTAFA, YAMAL  
2148 NW 17 AVENUE  
MIAMI FL 33142

81 Name LUCY AMALFI CORREA  
82 Street Address (P.O. Box Number is Not Acceptable)  
2148 N.W. 17 AVENUE  
83 MIAMI, FL 33142  
84 City MIAMI, FL 2 FL 85 Zip Code 33142

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

*Lucy Amalfi Correa*  
Signature of registered agent and title if applicable

(NOTE: Registered Agent Signature required when filing)

3/8/99  
(DATE)

12. OFFICERS AND DIRECTORS

TITLE PVST  
NAME MUSTAFA, YAMAL  
STREET ADDRESS 2148 NW 17 AVENUE  
CITY-ST-ZIP MIAMI FL 33142  
☒ DELETE

TITLE D  
NAME MUSTAFA, YAMAL  
STREET ADDRESS 2148 NW 17 AVENUE  
CITY-ST-ZIP MIAMI FL 33142  
☒ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

TITLE  
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CITY-ST-ZIP  
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☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

13.

11 TITLE PVST  
12 NAME Correa, Lucy Amalfi  
13 STREET ADDRESS 2148 NW 17 Avenue  
14 CITY-ST-ZIP Miami, FL 33142  
☒ Change ☐ Addition

21 TITLE Director  
22 NAME Correa, Lucy Amalfi  
23 STREET ADDRESS 2148 NW 17 Avenue  
24 CITY-ST-ZIP Miami, FL 33142  
☐ Change ☐ Addition

31 TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP  
☐ Change ☐ Addition

41 TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP  
☐ Change ☐ Addition

51 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP  
☐ Change ☐ Addition

61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY-ST-ZIP  
☐ Change ☐ Addition

APPROVED  
FILED

99 MAR -2 AM 9:48

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
12/08/1997
4. FEI Number  
65-0801326
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax ☐ Yes ☐ No
10. Name and Address of New Registered Agent

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: *Lucy Amalfi Correa*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/08/99 (305) 326

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CR2E034 (11/98)