

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Aug 25, 1999 8:00 am
Secretary of State

08-25-1999 90006 031 ***150.00

0125718

**PROFIT
CORPORATION
ANNUAL REPORT
1999**



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

DOCUMENT # P98000001163

1. Corporation Name

LA GUADALUPANA STORE, INC.

Principal Place of Business

**4960 US HWY #1
VERO BEACH FL 32962**

Mailing Address

**4960 US HWY #1
VERO BEACH FL 32962**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/06/1998

4. FEI Number

65-0807531

Applied For

Not Applicable

2. Principal Place of Business

21
Suite, Apt. #, etc.

2a. Mailing Address

26
Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

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. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**GOMEZ, JESUS
4960 US HWY #1
VERO BEACH FL 32962**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE
NAME **GOMEZ, JESUS**
STREET ADDRESS **8325 97TH CT**
CITY-ST-ZIP **VERO BEACH FL 32967**

TITLE **D** ☐ DELETE
NAME **GOMEZ, ELIDA**
STREET ADDRESS **8325 97TH CT**
CITY-ST-ZIP **VERO BEACH FL 32967**

TITLE **D** ☐ DELETE
NAME **CENDEJAS, UBALDO**
STREET ADDRESS **8766 102NE CT**
CITY-ST-ZIP **VERO BEACH FL 32967**

TITLE **D** ☐ DELETE
NAME **CENDEJAS, VITALINA**
STREET ADDRESS **8766 102NE CT**
CITY-ST-ZIP **VERO BEACH FL 32967**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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.

SIGNATURE:

Jesús Gomez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/18/99 561 770 9222
Date Daytime Phone #

CR2E034 (5/99)

La Guadalupana Store, Inc.
4690 US Highway # 1
Vero Beach, FL 32962
(561) 770-9222

P98000001163
609437-90006-31

August 18, 1999


Florida Department of State
Division of Corporations
PO BOX 6327
Tallahassee, FL 32314

RE: P98000001163

To whom it may concern:

Pursuant to our phone conversation regarding our renewal fee. We sent in payment back in January 1999, but we are yet to receive our canceled check. Thus we believe the check got lost or misplaced in the mail. So with this in mind, we contacted the State's office and were instructed to sent in a payment of \$150.00 (the original fee required for renewal) and ignore the \$550 fee. Thank you for consideration. Enclosed is the check and the completed form.

Thank you,



La Guadalupana Store, Inc.
Jesus Gomez - President