02181999-90105-038-\$165.00-\$165.00

PROFIT

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

FILL ISP CORPORATION Katherine Harris **ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS 1999 99 IMR - 9 PH 1:59 DOCUMENT # P9800002677 ARLINGTON FOOD MART, INC. Principal Place of Business Mailing Address 3470 SANDBURG RD JACKSONVILLE FL 32277 3470 SANDBURG RD JACKSONVILLE FL 32277 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifori 01/08/1998 2. Principal Piece of Business 2a. Mailing Address FEI Number 59 - 3485043 Applied For 21 26 Not Applicable Sulte, Apt. #, etc. Suite, Apl. #, etc. \$8.75 Additional Fee Required 22 27 Cky & State City & State \$5.00 May Bo 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Zip Country This corporation owes the current year intangible
Personal Property Tax. 24 30 25 29 Personal Property Tax. 9. Name and Address of Current Registered Agent 19. Name and Address of New Registered Agent Name JUBRAN, SAM Street Address (P.O. Box Number is Not Acceptable) 82 3470 SANDBURG RD JACKSONVILLE FL 32277 83 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above named corporation sub-office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of egent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE CR2E034 (11/98) 12. OFFICERS AND DIRECTORS .13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change TITLE 1.1 TITLE ☐ Addition JUBRAN, SAM 1.2 NAME 3470 SANDBURG RD STREET ADDRESS 1.3 STREET ADDRESS JACKSONVILLE FL 32277 CITY-SI-ZIP 1.4 C/TY-ST-ZIP DELETE Addition TITLE Change 21 TITLE NAME 22 KALÆ STREET ADDRES 2.3 STREET ADORESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TIME 31 mile Change Addition 32 NAME STREET ADDRESS 13 STREET ADDRESS C/TY-ST-ZIP 14 CITY-ST-ZIP DELETE Change TITLE 41 TITLE Addition NAME: 4 2 NAME STREET ADDRES 43 STREET ADORESS C/TY-31-2P 44 CITY-ST-ZIP TITLE DELETE 51 TITLE Change Addition 5 2 HAVE NAME 5.3 STREET ADORESS STREET ADORES 54 CITY- ST-ZIP CITY-ST-ZIP DELETE 81 TITLE TITLE Change Addition 82 NAME KAME 6 3 STREET ADORES STREET ADDRESS the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information te and that my signature shall have the same legal effect as if made under cett; that I em an cule this report as required by Chapter 607, Florida Statutes, and that my name appears in ther like empowered. 14. I hereby certify that the information supplied with this filing does not qualify indicated on this annual report or supplemental annual report is true and acofficer or director of the corporation or the receiver or furstee empowered to an attachment with an address, with

FLORIDA DEPARTMENT OF STATE