FILED Apr 25, 1999 8:00 am Secretary of State 04-25-1999 90032 023 ***150.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #	P98000038995

1. Corporation Name

ALL NATURE'S SAFEWAY, CORP.

Principal Place	e of Business	Mailing Address	•						
453 22ND AVE.	S.E.	453 22ND AVE. S.E.							
ST. PETERSBUI	RG FL 33705	ST. PETERSBURG FL 33	705			DO NOT WRITE IN TH	IIS SPACE		
						3. Date Incorporated or Qualifed			
	. •	•				04/28/1998			
	·	2a. Mailing Address				4. FEI Number	An	plied For	
	tace of Business					59-3519608	 }	t Applicable	
21 26 Suite Ant # etc Suite, Apt. #, e							\$8.75		
- Ballot Apr At old		<u> </u>	t. ·			5. Certificate of Status Desired		Fee Required	
22		City & State			:-	6. Election Campaign Financing	\$5.00	May Be	
City & Stat			-			Trust Fund Contribution	Added I		
23	Country		Cou	intry		8. This corporation owes the current year	Intangible		
Zip		29	30			Personal Property Tax.	☐ Yes	ØNo	
24	9. Name and Address of Curren		1301			10. Name and Address of New Registers	d Agent		
	o, name and Address of Cure	in 145 August an 1. Dans		81 1	Name				
WAI	KER, MICHAEL JO				<u> </u>	TO COUNTY TO STATE AND ADDRESS OF THE STATE ADDRESS OF THE STATE AND ADDRESS OF THE STATE ADDRESS OF THE ADDRESS OF THE STATE AND ADDRESS OF THE STATE ADDRESS OF THE ADDRESS OF THE STATE ADDRESS OF THE ADD			
	22ND AVE S.E.			82 3	Street Add	tress (P.O. Box Number is Not Acceptable)			
	PETERSBURG FL 33705			83					
U 1.	- Cicionalia - Control			ľL					
				84	City	F	B5 Zip (Code	
						acerting exhaults this statement for the aurose	of changing its	registered	
11. Pursuant	to the provisions of Sections 607.050 registered agent, or both, in the State	of Florida, Such change was	uxes, me a authorized	bove-i	e corporat	poration submits this statement for the purpose ion's board of directors. I hereby accept the ap	pointment as re	gistered	
agent. I a	m familiar with, and accept the obliga	ations of, Section 607.0505, F	Florida Stat	utes.				l	
SIGNATURE									
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable. (NC	TE: Registered			ned when reinstating) OATE			
12.	OFFICERS AN	ent and title if applicable. (NC ND DIRECTORS	TE: Registered	d Agent H					
12.	President	ont and title if applicable. (NC ND DIRECTORS	TE: Registers: 13.	Agent H		ned when reinstating) OATE	AND DIRECTO	RS IN 12	
12. TITLE NAME	President Michael Ja W	ent and title if applicable. (INC ND DIRECTORS DELETE ON YUR.	13. 1.1 TI	Agent H	ignature requi	ned when reinstating) OATE	AND DIRECTO	RS IN 12	
12.	President Michael Ja W	ont and doe if applicable. (NC ND DIRECTORS DELETE ON KURL	13. 1.1 TI 1.2 N	TLE AME	ignature requir	ned when reinstating) OATE	AND DIRECTO	RS IN 12	
12. IIILE NAME STREET ADDRESS CITY-ST-ZIP	President Michael Ja W 453 22 NO AVES ST. Peter Sburg	ent and dde if applicable. (NO DIRECTORS DELETE CA CAR ES. 1. 33705-333	13. 1.1 TI 1.2 NI 1.3 ST 1.4 CI	TLE AME TREETAL	ignature requir	ned when reinstating) OATE	AND DIRECTO	RS IN 12	
12. TITLE NAME STREET ADDRESS	President Michael Ja W	ent and dde if applicable. (NO DIRECTORS DELETE CA CAR ES. 1. 33705-333	13. 1.1 TI 1.2 NI 1.3 ST 1.4 CI 2.1 TI	TLE AME TREET AL TY-ST-Z	ignature requir	ned when reinstating) OATE	AND DIRECTO	RS IN 12	
12. TITLE RAME STREET ADDRESS CITY-ST-ZIP	President Michael Ja W 453 22 NO AVES ST. Peter Soura Vice- President	ont and doe if applicable. (NC ND DIRECTORS DELETE ON KILL ST. 33705-333	13. 1.1 TI 1.2 N 1.3 S 1.4 C 2.1 TI 2.2 N	TLE AME TREET AL TY-ST-Z TLE AME	DORESS	ned when reinstating) OATE	AND DIRECTO	RS IN 12	
12. TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE	President President Michael Ja W 453 2240 AVE.S ST. Peter Sburg. Vice - President Clarke Triples	ont and doe if applicable. (NC ND DIRECTORS DELETE CA FUR G. 33705-333 DELETE	13. 1.1 TI 1.2 N 1.3 S 1.4 CI 2.1 TI 2.2 N 2.3 S	TLE AME TREET AL TREET AL TREET AL TREET ALE TREET ALE	DORESS DORESS	ned when reinstating) OATE	AND DIRECTO	RS IN 12	
12. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME	President Michael Ja W 453 22 NO AVES ST. Peter Sburg, I Vice- President Clarke Triplet 2560 S. Shore ST. Petersburg,	ent and dde II applicable. (NO DIRECTORS DELETE A VICE 5. A 33705-333 DELETE TOL S.E. F1. 33705-333	13. 13.11 12.N 13.5 14.0 21.11 22.N 23.5 2.40	TLE AME TREET AL TTLE AME TREET AL TTLE AME TREET AL TREET AL	DORESS DORESS	ned when reinstating) OATE	AND DIRECTO Change Change	RS IN 12 Addition Addition	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	President Michael Ja W 453 22 NO AVES ST. Peter Sburg, I Vice- President Clarke Triplet 2560 S. Shore ST. Petersburg,	ent and dde II applicable. (NO DIRECTORS DELETE A VICE 5. A 33705-333 DELETE TOL S.E. F1. 33705-333	3 1.1 TI 22 N. 2.3 TI 22 N. 2.3 TI 22 N. 3.1 TI 2.4 CI 3.1 TI 3.4 CI 3.1	TLE AME TREET AL TTLE AME TREET AL TTLE TREET AL TTLE TTLE TTLE TTLE	DORESS ZP DORESS ZP	ned when reinstating) OATE	AND DIRECTO	RS IN 12	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Michael Ja W 453 22 NO RVES ST. Peter Sburg Vice - President Clarke Triplet 2560 S. Shore ST. Petersburg Secretary-Tre	and and the II applicable. (NO DIRECTORS) DELETE CALVUR FI. 33705-333 DELETE TO C. S. F. FI. 33705-333 CASUVE DELETE	3 13.1 13.1 12.N 13.5 14.0 2.1 2.1 2.3 2.3 2.4 3.1 3.1 3.3 2.4 3.1	TLE AME TREET AL TY-ST-Z TLE AME TREET AL TY-ST-Z TLE AME TREET AL AME TLE AME	DORESS DORESS ZP	ned when reinstating) OATE	AND DIRECTO Change Change	RS IN 12 Addition Addition	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	President Michael Ja W 453 22 NO AVES ST. Peter Sburg. Vice- President Clarke Triplet 2560 S. Shore ST. Petersburg. Secreteny- Tre Bonnie Walk	ant and the II applicable. (NO DIRECTORS) DELETE CALVUE TO 33705-333 DELETE TO S.E. FI. 33705-333 ASUVE DELETE	3 13. 13. 13. 13. 13. 13. 13. 13. 13. 13	TLE AME TREET AL TTLE AME TREET AL TTLE TREET AL TTLE TTLE TTLE TTLE	DORESS DORESS ZP	ned when reinstating) OATE	AND DIRECTO Change Change	RS IN 12 Addition Addition	
TILE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	President Michael Ja W 453 22 NO AVES ST. Peter Sburg Vice - President Clarke Triplet 2560 S. Shore ST. Petersburg Secreteny-Tre Bonnie Walk	ont and the II application. (NO DIRECTORS DELETE A FUR DELETE TO S.E. FI. 33705-333 LASUVE DELETE S.E. 33705-33	3 13.7 13.7 13.7 13.7 13.7 13.7 13.7 13.	TLE AME TREET AL	DORESS ZP DORESS ZP DORESS	ned when reinstating) OATE	AND DIRECTO Change Change	RS IN 12 Addition Addition	
12. TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	President Michael Ja W 453 22 NO RVES ST. Peter Sburg Vice - President Clarke Triplet 2560 S. Shore ST. Petersburg Secreteny-Tre Bonnie Walk	ant and the II applicable. (NO DIRECTORS) DELETE CALVUE TO 33705-333 DELETE TO S.E. FI. 33705-333 ASUVE DELETE	3 13. 13. 13. 13. 13. 13. 13. 13. 13. 13	TLE AME TREET AL	DORESS ZP DORESS ZP DORESS	ned when reinstating) OATE	AND DIRECTO Change Change	RS IN 12 Addition Addition	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Michael Ja W 453 22 NO RVES ST. Peter Sburg Vice - President Clarke Triplet 2560 S. Shore ST. Petersburg Secreteny-Tre Bonnie Walk	ont and the II application. (NO DIRECTORS DELETE A FUR DELETE TO S.E. FI. 33705-333 LASUVE DELETE S.E. 33705-33	3 13.7 13.7 13.7 13.7 13.7 13.7 13.7 13.	TILE AME TREET AL TITLE AME TREET AL TITLE AME TREET AL TITLE TREET AL TITLE	DORESS ZP DORESS ZP DORESS	ned when reinstating) OATE	AND DIRECTO Change Change	RS IN 12 Addition Addition	
12. TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE STREET ADDRESS CITY-ST-ZIP TITLE	President Michael Ja W 453 22 NO AVES ST. Peter Sburg, Vice- President Clarke Triplet 2560 S. Shore ST. Petersburg, Secreteny-Tre Bonnie Walk 1453 2222 AVE ST. Petersburg,	ont and the II application. (NO DIRECTORS DELETE A FUR DELETE TO S.E. FI. 33705-333 LASUVE DELETE S.E. 33705-33	3 13.7 14.0 2.1 17.2 2.1 2.1 2.1 3.3 2.4 0.4 2.1 3.3 3.3 3.4 0.4 2.7 3.4 2.8 3.5 3.4 0.4 2.8 3.5 3.4 0.4 2.8 3.5 3.4 0.4 2.8 3.5 3.4 0.4 2.8 3.5 3.4 0.4 2.8 3.5 3.4 0.4 2.8 3.5 3.4 0.4 2.8 3.5 3.4 0.4 2.8 3.5 3.4 0.4 2.8 3.5 3.4 0.4 2.8 3.5 3.4 0.4 2.8 3.5 3.4 0.4 2.8 3.5 3.4 0.4 2.8 3.5 3.4 0.4 2.8 3.5 3.4 0.4 2.8 3.5 3.4 0.4 2.8 3.5 3.5 3.4 0.4 2.8 3.5 3.5 3.4 0.4 2.8 3.5 3.5 3.4 0.4 2.8 3.5 3.5 3.4 0.4 2.8 3.5 3.5 3.4 0.4 2.8 3.5 3.5 3.4 0.4 2.8 3.5 3.5 3.5 3.5 3.5 3.5 3.5 3.5 3.5 3.5	TILE AME TREET AL TITLE AME TREET AL TITLE AME TREET AL TITLE TREET AL TITLE	DORESS ZIP DORESS ZIP	ned when reinstating) OATE	AND DIRECTO Change Change	RS IN 12 Addition Addition	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	President Michael Ja W 453 22 NO AVES ST. Peter Sburg, Vice- President Clarke Triplet 2560 S. Shore ST. Petersburg, Secreteny-Tre Bonnie Walk 1453 2222 AVE ST. Petersburg,	The set of the population of t	3 13.11 12.N 13.51 14.00 21.11 22.N 23.5 24.0 3.11 32.N 3.3 34.0 4.7 7 4.2 N 4.3 S	TILE AME TREET AL TREET	DORESS ZIP DORESS ZIP DORESS	ned when reinstating) OATE	AND DIRECTO Change Change	RS IN 12 Addition Addition Addition	
12. TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	President Michael Ja W 453 22 NO AVES ST. Peter Sburg, Vice- President Clarke Triplet 2560 S. Shore ST. Petersburg, Secreteny-Tre Bonnie Walk 1453 2222 AVE ST. Petersburg,	ont and the II application. (NO DIRECTORS DELETE A FUR DELETE TO S.E. FI. 33705-333 LASUVE DELETE S.E. 33705-33	3 13. 11 17 12 N 13. 14 C 14 C 15 17 18 18 18 18 18 18 18 18 18 18 18 18 18	TAGET AL TITLE AME TREET AL TITLE TREET AL TREET AL	DORESS ZIP DORESS ZIP DORESS	ned when reinstating) OATE	AND DIRECTO Change Change	RS IN 12 Addition Addition	
TILE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP	President Michael Ja W 453 22 NO AVES ST. Peter Sburg, Vice- President Clarke Triplet 2560 S. Shore ST. Petersburg, Secreteny-Tre Bonnie Walk 1453 2222 AVE ST. Petersburg,	The set of the population of t	3 13.1 12N 12N 12N 12N 12N 12N 12N 12N 12N 12	TAGET AL TITLE AME TREET AL TITLE TREET AL TREET AL	DORESS ZIP DORESS ZIP DORESS	ned when reinstating) OATE	AND DIRECTO Change Change	RS IN 12 Addition Addition Addition	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	President Michael Ja W 453 22 NO AVES ST. Peter Sburg, I Vice- President Clarke Triplet 2560 S. Shore ST. Petersburg, Secreteny-Tre Bonnie Walk 1453 22 NO AVE ST. Petersburg, E	The set of the population of t	3 140 217 3 140 217 3 28 3 240 3 31 3 3 3 3 4.0 4.77 4.28 4.30 5.17 5.28	TAGET AL TITLE AME TREET AL TITLE TREET AL TREET AL	DORESS ZP DORESS ZP DORESS ZP	ned when reinstating) OATE	AND DIRECTO Change Change	RS IN 12 Addition Addition Addition	
TILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	President Michael Ja W 453 22 NO AVES ST. Peter Sburg, I Vice- President Clarke Triplet 2560 S. Shore ST. Petersburg, Secreteny-Tre Bonnie Walk 1453 22 NO AVE ST. Petersburg, E	The set of the population of t	3 13. 13. 13. 13. 13. 13. 13. 13. 13. 13	IT Agent of Agent of Agent of Agent of Agent of Agent of ITMLE AME ITMLE ITMLE AME ITMLE ITMLE	DORESS ZP DORESS ZP DORESS ZP DORESS DORESS	ned when reinstating) OATE	AND DIRECTO Change Change Change	RS IN 12 Addition Addition Addition Addition Addition	
TILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	President Michael Ja W 453 22 NO AVES ST. Peter Sburg, I Vice- President Clarke Triplet 2560 S. Shore ST. Petersburg, Secreteny-Tre Bonnie Walk 1453 22 NO AVE ST. Petersburg, E	The set of the population of t	3 13. 13. 13. 13. 13. 13. 13. 13. 13. 13	IT Agent of Agent of Agent of Agent of Agent of Agent of ITMLE AME ITMLE ITMLE AME ITMLE ITMLE	DORESS ZP DORESS ZP DORESS ZP DORESS DORESS	ned when reinstating) OATE	AND DIRECTO Change Change	RS IN 12 Addition Addition Addition	
TILE TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	President Michael Ja W 453 22 NO AVES ST. Peter Sburg, I Vice- President Clarke Triplet 2560 S. Shore ST. Petersburg, Secreteny-Tre Bonnie Walk 1453 22 NO AVE ST. Petersburg, E	The second does it applicables. The DELETE of Land Control of the Delete	3 13. 13. 13. 13. 13. 13. 13. 13. 13. 13	TAGET ALL TITLE AME TITLE	DORESS ZP DORESS ZP DORESS ZP DORESS DORESS	ned when reinstating) OATE	AND DIRECTO Change Change Change	RS IN 12 Addition Addition Addition Addition Addition	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	President Michael Ja W 453 22 NO AVES ST. Peter Sburg, I Vice- President Clarke Triplet 2560 S. Shore ST. Petersburg, Secreteny-Tre Bonnie Walk 1537 2212 AVE ST. Petersburg, E	The second does it applicables. The DELETE of Land Control of the Delete	3 13.0 13.0 13.0 13.0 13.0 13.0 13.0 13.	TAGET ALL TITLE AME TITLE	DORESS ZP DORESS ZP DORESS ZP DORESS ZP	ned when reinstating) OATE	AND DIRECTO Change Change Change	RS IN 12 Addition Addition Addition Addition Addition	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME TITLE NAME TITLE TITLE TITLE TITLE TITLE TITLE TITLE	President Michael Ja W 453 22 NO AVES ST. Peter Sburg, I Vice- President Clarke Triplet 2560 S. Shore ST. Petersburg, Secreteny-Tre Bonnie Walk 1537 2212 AVE ST. Petersburg, E	The second does it applicables. The DELETE of Land Control of the Delete	3 13. 13. 13. 13. 13. 13. 13. 13. 13. 13	TAGET ALL TITLE AME TREET AL TITLE AME TREET AL TITLE AME TREET AL TITLE AME TREET AL TITLE TREET AL TITLE AME TREET AL TITLE AME TREET AL T	DORESS ZP DORESS ZP DORESS ZP DORESS ZP DORESS	ned when reinstating) OATE	AND DIRECTO Change Change Change	RS IN 12 Addition Addition Addition Addition Addition	

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.