02 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

02 DEC -9 AM 11:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

200009422662
12/09/02--01086--004 **61.25

DOCUMENT # P99000059442

1. Entity Name
ATLANTIC FOOD MARKET CORP.

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2. Principal Place of Business	3. Mailing Address
12999 SW 248 ST.	12999 SW 248 ST.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: PRINCETON, FLORIDA	City & State: PRINCETON, FLORIDA
Zip: 33032 Country: USA	Zip: 33032 Country: USA

4. FEI Number: 650933435 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: RICHARD BARON

Street Address (P.O. Box Number is Not Acceptable): 11077 BISCAYNE BLVD. #307

City: Miami FL Zip Code: 33161

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: RICHARD BARON
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)
DATE: 11/26/02

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee Is $150.00
After May 1 Fee Is $550.00
Amended UBR Is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	VICE PRESIDENT
NAME	HENRY DIAZ
STREET ADDRESS	13501 SW 268 Street
CITY-ST-ZIP	NARANJA FLORIDA 33032
TITLE	PRESIDENT
NAME	JIMMY DIAZ
STREET ADDRESS	13501 SW 268 Street
CITY-ST-ZIP	Naranja, FLORIDA 33032
TITLE	
NAME	
STREET ADDRESS	
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CR2E034B (12/01)

13. 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 report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 11/26/02 Daytime Phone #: 3052581155

gr 12/11