FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

DOCUMENT # **S46523** **(4)**

1. Corporation Name
GABLES MARKET, INC.

Principal Place of Business	Mailing Address
2238 S.W. 57TH AVENUE MIAMI FL 33155	2238 S.W. 57TH AVENUE MIAMI FL 33155

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/19/1991	3a. Date of Last Report: 08/23/1994
4. FEI Number: 65-0284113	☐ Applied For ☐ Not Applicable
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. The corporation has/will be changing its status under § 193.022 Florida Statutes ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
AGUILAR, AIDA 2945 SW 13TH ST. MIAMI FL 33145	81 Name: JUAN AGUILAR. 82 Street Address (P.O. Box Number is Not Acceptable): 2945 S.W. 13 Street. 83 84 City: Miami FL 85 Zip Code: 33145

11. Pursuant to the provisions of Section 607.0502, 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: (JUAN AGUILAR) President. 04/23/95
(Date)

12. OFFICERS AND DIRECTORS	13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS, IN L
TITLE: D NAME: AGUILAR, AIDA STREET ADDRESS: 2945 SW 13 STREET CITY-ST-ZIP: MIAMI FL 33145	☒ Change ☐ Addition TITLE: D/P NAME: JUAN AGUILAR STREET ADDRESS: 2945 S.W. 13 Street CITY-ST-ZIP: Miami FL. 33145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

14. I/We hereby certify that the information supplied with this filing is voluntarily furnished and 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 above, or on an attachment with an address.

SIGNATURE: (JUAN Aguilar). 04/23/95 (305) 262-4990
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Telephone Number)

0164282 CP