FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham **ANNUAL REPORT** Secretary of State 98 APR 24 PM 1: 16 1998 DIVISION OF CORPORATIONS SECRETARY OF STATE TALLAHASSEE. FLORIDA DOCUMENT #
1. Corporation Name (9)LUCKY MEAT MARKET, INC. Principal Place of Business Mailing Address 2300 CORAL WAY 2300 CORAL WAY #200 MIAMI FL 33145 MIAMI FL 33145 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 12/16/1991 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 2300 CORAL WAY 26 2300 CORAL WAY 65-0300820 Not Applicable Suite, Apt. #, etc.
SUITE # 200 Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 SUITE # 200 Fee Regulred City & State City & State 6. Election Campaign Financing \$5.00 May Be MIAMI, FLORIDA 28 MIAMI, FLORIDA Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 33145 25 US 29 33145 30 US Personal Property Tax due June 30. ☐ Yes 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent FLORIDA ANNUAL REPORT SERVICES INC 81 Name 2300 CORAL WAY 82 Street Address (P.O. Box Number is Not Acceptable) #200 83 MIAMI FL 33145 84 City 85 Zip Code 2 and 607 1808. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of the foundar such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered in the faction 507.0535. Florida Statutes. 11. Pursuant to the p office or regi AMADA CANTERA LOPEZ - PRES SIGNATURE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITE F 11 1111 Change Addition **GUERRERO**, OLGA NAME 1.2 NAME 000002504020-- 5 -04/28/98--01122--011 2685 S.W. 119 CT. STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY - ST - 7IP \*\*\*\*150.00 \*\*\*\*150.00 TITLE OF LETE 2.1 TITLE 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY - ST - ZIP TITLE DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS ITY-ST-ZIP 3.4. CITY - ST - ZIP ITLE DELETE Change 4.1 TITLE Addition AME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY+ST-Z#P 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6 1 TITLE Addition NAME 6.2 NAME

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 suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath, 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.

6.3 STREET ADDRESS

6.4 CHY-ST-7/P

STREET ADDRESS

CITY-ST-ZIP