

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
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TALLAHASSEE
FLORIDA

DOCUMENT # V06236

(6)

1. Corporation Name

MARINER'S MARKET, INC.

Principal Place of Business

1 AVE A
FT. PIERCE FL 34948
US

Mailing Address

PO 4479
FT. PIERCE FL 34948
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Created

01/13/1992

3a. Date of Last Report

04/18/1994

4. FEI Number

65-0305833

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 liability for intangible tax under 176.032
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21. City, State

2a. Mailing Address

26. City, State

22. City, State

27. City, State

23. City, State

28. City, State

24. City, State

29. City, State

30. City, State

9. Name and Address of Current Registered Agent

KERN, JAMES W.
6006 INDRIO ROAD
#B-1
FT. PIERCE FL 34948

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

2800 N. HWY A1A

83. # 1002

84. City

Ft. Pierce

FL

85. Zip Code

34949

10. Name and Address of New Registered Agent

11. I, the undersigned, the president or secretary of the corporation, hereby certify that the above named corporation is duly organized and exists as a corporation under the laws of the State of Florida, and that the corporation is in good standing and is not delinquent in the payment of its taxes and is not in violation of any law of the State of Florida. I am authorized to make and sign this statement and to file it with the Department of State.

Signature

12. OFFICERS AND DIRECTORS

NAME	D KERN, JAMES W. 6006 INDRIO RD. #B1 FT. PIERCE FL 34948
NAME	D KERN, LINDA M. 6006 INDRIO RD. #B1 FT. PIERCE FL 34948
NAME	D KERN, FLORENCE M. 108 MID-SHORE DR. BUFFALO NY
NAME	
NAME	
NAME	
NAME	
NAME	
NAME	
NAME	

13. ADDITIONAL OFFICERS, DIRECTORS AND SHAREHOLDERS

NAME	X Change ☐ Add New ☐
NAME	2800 N. HWY A1A #1002 FT. PIERCE FL 34949
NAME	X Change ☐ Add New ☐
NAME	2800 N. HWY A1A #1002 FT. PIERCE FL 34949
NAME	☐ Change ☐ Add New
NAME	☐ Change ☐ Add New
NAME	☐ Change ☐ Add New
NAME	☐ Change ☐ Add New
NAME	☐ Change ☐ Add New
NAME	☐ Change ☐ Add New

14. I, the undersigned, certify that the information supplied with this filing is accurate, complete and correct, and that the corporation is in good standing and is not delinquent in the payment of its taxes and is not in violation of any law of the State of Florida. I am authorized to make and sign this statement and to file it with the Department of State.

SIGNATURE:

James W. Kern JAMES W. KERN.

4/9/95 407 468-7002