

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M75772

FILED
Apr 14, 2009
Secretary of State

Entity Name: A & A WEST INDIAN GROCERIES, INC.

Current Principal Place of Business:

5165 FORSYTH COMM RD
ORLANDO, FL 32807 US

New Principal Place of Business:

Current Mailing Address:

1210 SARAH LANE
LONGWOOD, FL 32750 US

New Mailing Address:

5165 FORSYTH COMM RD
ORLANDO, FL 32807 US

FEI Number: 59-2995305

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ASSIM, MOHAMED
1210 SARAH AVENUE
LONGWOOD, FL 32750 US

Name and Address of New Registered Agent:

ASSIM, MOHAMED
5165 FORSYTH COMM RD
ORLANDO, FL 32807 US

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: B. AMENA ASSIM

04/14/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ASSIM, MOHAMED A.
Address: 2800 ASHTON TERR
City-St-Zip: OVIEDO, FL 32765

Title: VPD () Delete
Name: ASSIM, BIBI A
Address: 2800 ASHTON TERR
City-St-Zip: OVIEDO, FL 32765

Title: S () Delete
Name: ALLI, ABDUL
Address: 3624 STONEFIELD DRIVE
City-St-Zip: ORLANDO, FL 32826

Title: S () Delete
Name: ALLI, ANGELA
Address: 3624 STONEFIELD DR
City-St-Zip: ORLANDO, FL 32826

Title: T () Delete
Name: ASSIM, RICHARD
Address: 2951 LAGOON COVE
City-St-Zip: OVIEDO, FL 32765

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: B. AMENA ASSIM

VP

04/14/2009

Electronic Signature of Signing Officer or Director

Date