

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000069202

FILED
Apr 19, 2005
Secretary of State

Entity Name: POINCIANNA GROCER, INC.

Current Principal Place of Business:

881 TOWNE CENTER BLVD
POINCIANNA, FL 34759 US

New Principal Place of Business:

Current Mailing Address:

881 TOWNE CENTER BLVD
POINCIANNA, FL 34759 US

New Mailing Address:

FEI Number: 42-1596873 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOOD, SANJAY
3556 SW 173 WAY
MIRAMAR, FL 33029 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SOOD, SANJAY
Address: 3556 SW 173 WAY
City-St-Zip: MIRAMAR, FL 33029 US

Title: V () Delete
Name: UDDIN, MOHAMMED J
Address: 15720 BULL RUN RD., #478-H
City-St-Zip: MIAMI LAKES, FL 33014 US

Title: T () Delete
Name: HOSSAIN, MOHAMMED
Address: 136 BIANCA COURT
City-St-Zip: POINCIANA, FL 34758

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change () Addition
Name: UDDIN, MOHAMMED J
Address: 15570 N.W. 12 PLACE
City-St-Zip: PEMBROKE PINES, FL 33028 US

Title: T (X) Change () Addition
Name: HOSSAIN, MOHAMMED
Address: 505 ELBRIDGE PLACE
City-St-Zip: POINCIANA, FL 34758

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SANJAY SOOD

P

04/19/2005

Electronic Signature of Signing Officer or Director

_____ Date