

1-16-98 B-0166-C

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jan 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P95000079342 (8)**
1. Corporation Name
ABCD MARKET, INC.



Principal Place of Business 5979 LYONS STREET #A ORLANDO FL 32807	Mailing Address 5979 LYONS STREET #A ORLANDO FL 32807
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/13/1995	
21		26	306 CHUTNEY DRIVE	4. FEI Number 59-3339451	Applied For Not Applicable
22	Suite, Apt. #, etc. 306 CHUTNEY DRIVE	27	Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	City & State ORLANDO - FL -	28	City & State ORLANDO - FL -	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Zip 32825	25	Country ORANIE	29	30
				3. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**FAROOQUI, MOHAMMED A
5979 LYONS STREET #A
ORLANDO FL 32807**

10. Name and Address of New Registered Agent

81	Name SOME NAME
82	Street Address (P.O. Box Number is Not Acceptable) 306 CHUTNEY DRIVE
83	
84	City ORLANDO -
85	Zip Code FL 32825-3612

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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: _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	FAROOQUI, MOHAMMED A	
STREET ADDRESS	5979 LYONS STREET #A	
CITY-ST-ZIP	ORLANDO FL 32807	
TITLE	D	<input type="checkbox"/> DELETE
NAME	FAROOQUI, SHAMIM A	
STREET ADDRESS	5979 LYONS STREET #A	
CITY-ST-ZIP	ORLANDO FL 32807	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	CHANGE OF ADDRESS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	306 CHUTNEY DRIVE	
1.3 STREET ADDRESS	ORLANDO - FL - 32825 - 3612	
1.4 CITY-ST-ZIP		
2.1 TITLE	CHANGE OF ADDRESS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	306 CHUTNEY DRIVE	
2.3 STREET ADDRESS	ORLANDO - FL - 32825 - 3612	
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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 if changed, or on an attachment with an address.

SIGNATURE: *Mohammed A. Farooqui* **MOHAMMED A. FAROOQUI** JAN. 7 1998 (409) 855-2303

CR2E034 (10/97)