

**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 12, 2007 08:00 A**  
**Secretary of State**

**DOCUMENT # 455007**  
 1. Entity Name  
 RAY'S MARKET, INC.



Principal Place of Business      Mailing Address  
 1707 NW 6TH ST                      1707 NW 6TH ST  
 FT LAUDERDALE, FL 33311          FT LAUDERDALE, FL 33311

**DO NOT WRITE IN THIS SPACE**



02072007      No Chg-P      CR2E034 (11/05)

4. FEI Number 59-1542512	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
 ABUL-KHAIR, IBRAHIM  
 10611 NW 18TH DR  
 PLANTATION, FL 33322

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.            **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT IBRAHIM, ABUL-KHAIR 10611 NW 18 DR PLANTATION, FL 33322
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000631193  
 02/20/07-80036-022 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *Abul-Khair Ibrahim*      Date: *2/9/07*      Day/mt Phone # \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Day/mt Phone #