

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H96325

Entity Name: S.O.S. GROCER, INC.

FILED
Apr 26, 2004
Secretary of State

Current Principal Place of Business:

1952 NE 49 ST
POMPANO BEACH, FL 33064 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 51487
LIGHTHOUSE PT, FL 33074 US

New Mailing Address:

FEI Number: 59-2636576

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GHANCHI, SALEEM
1952 NE 49 ST
POMPANO BCH, FL
POMPANO BEACH, FL 33064 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: SALEEM, GHANCHI,
Address: 1952 NE 49TH ST.
City-St-Zip: POMPANO BCH., FL

Title: VP () Delete
Name: ELVIR, MICHELLE
Address: 14997 SW 51 PL
City-St-Zip: DAVIE, FL 33331

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SALEEM, GHANCHI,
Address: 1952 NE 49TH ST.
City-St-Zip: POMPANO BCH., FL 33068

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

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: MICHELLE ELVIR

VP

04/26/2004

Electronic Signature of Signing Officer or Director

Date