

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1999

ANNUAL REPORT



J 25482

FLORIDA DEPARTMENT OF REVENUE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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DOCUMENT #

J25482

1. Corporation Name

K.P. Super Market Inc.

Principal Place of Business

Mailing Address

1225 W. Broward Blvd 1225 W. Broward Blvd
Portland, FL 33312 Ft. Lauderdale, FL 33312

OK

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified To Do Business in Florida

7-24-86

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-2707845

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

CERTIFICATE OF STATUS DESIRED

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

| Title(s) | Name of Officers and/or Directors | Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) | City / State / Zip |
|--|-----------------------------------|---|-------------------------|
| 1 | 2 | 3 | 4 |
| PD | SARIEV, TAHIRA SR | 1225 W. Broward Blvd | Ft Lauderdale, FL 33312 |
| STD | OZEN, ZUHRA T | 1225 W. Broward Blvd | Ft Lauderdale, FL 33312 |
| VD | SARIEV, FATIMA T | 1225 W. Broward Blvd | Ft Lauderdale, FL 33312 |
| <div style="border: 2px solid black; padding: 10px; width: fit-content; margin: 10px auto;"> <p>THIS IS THE 1999 ANNUAL REPORT.</p> </div> | | | |
| <p>000003082540-0 -12/29/99-01012-014 ***150.00 ***150.00</p> | | | |

8. Name and Address of Current Registered Agent

SARIEV, TAHIR, A. SR
1225 West Broward Blvd.
Fort Lauderdale, FL 33312

9. Name and Address of New Registered Agent

| | |
|--|----------------|
| Name | |
| Street Address (P.O. Box Number is Not Acceptable) | |
| Suite, Apt. #, Etc. | |
| City | State Zip Code |
| | FL |

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent

Tahir A. Sariev
REGISTERED AGENT MUST SIGN

Date 11-22-99

11. This corporation owes the current year Intangible Personal Property Tax due June 30.

Yes ☐ No ☒

(See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-22-99

Date

Daytime Phone #

(954)
463-5001