2005 LIMITED LIABILITY COMPANY --- ANNUAL REPORT

TITLE NAME STREET ADDRESS CITY-ST-ZIP

FILED AM e

1. Entity Nan	MENT # L01000015060 PF FOOD MART, L.L.C.		Aug 16, 2005 08:00 Secretary of Stat
	nway street 3310 s. conway street FL 32812 Orlando, fl. 32812		
DO NOT WRITE IN THIS SPACE			07262005 No Chg-LLC CR2E083 (10/03) 4. FEI Number Applied For S9-3741026 Not Applicable 5. Certificate of Status Desired \$5.00 Additional Fee Required
6. Name and Address of Current Registered Agent SHAIKH, ABDUL N 3310 S. CONWAY STREET ORLANDO, FL 32812			DO NOT WRITE IN THIS SPACE
the obligate	e named entity submits this statement for the purpose of changing its registerations of registered agent. Signature, typed or printed name of registered agent and title if applicable. [NOTE Register ling Fee is \$50.00 by September 7, 2005	ed Agant signature required	· · · · · · · · · · · · · · · · · · ·
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS MGRM SHAIKH, ABDUL N 3310 S. CONWAY STREET ORLANDO, FL 32812		U00000376537 08/16/05-80002-005 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		·	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited flability company or the receiver or trustee empowered to execute this report as regulated by Chapter 608, Florida Statutes.

SIGNATURE:	7-28-	2005. 407-423-237
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OF AUTHORIZED REPRESENTATIVE	Dale	Deytime Phone #