

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 14, 2004 8:00 am
Secretary of State

04-14-2004 90078 025 ***150.00

DOCUMENT # P00000008910

1. Entity Name

DALIA FOOD MART INC



Principal Place of Business

4937 E. BUSINESS HWY. 98
PANAMA CITY FL 32404

Mailing Address

4937 E. BUSINESS HWY. 98
PANAMA CITY FL 32404

2. Principal Place of Business

4937 E. BUSINESS HWY 98
PARKER, FL 32404

3. Mailing Address 4937 E. BUSINESS HWY 98

PARKER, FL 32404

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PARKER, FL

City & State

PARKER, FL

Zip

32404

Country

FLA

Zip

32404

Country

FLA

4. FEI Number

59-3622807

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ABUQALBEEN, ALI
4937 E. BUSINESS HWY 98
PANAMA CITY FL 32404

Name

Street Address (P.O. Box Number is Not Acceptable)

4937 E. BUSINESS HWY 98

City PARKER

FL

Zip Code 32404

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

Ali

ALI ABUQALBEEN

04/13/04

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PST ☐ Delete
NAME ABUQALBEEN, ALI
STREET ADDRESS 4937 E BUSINESS HWY 98
CITY-ST-ZIP PANAMA CITY FL 32404

TITLE VPT ☐ Delete
NAME ABUQALBEEN, ALI
STREET ADDRESS 4937 E BUSINESS HWY 98
CITY-ST-ZIP PANAMA CITY FL 32404

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 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:

Ali ALI ABUQALBEEN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/13/04

Date

(850) 960 9255

Daytime Phone #