

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000001430

1. Entity Name
XTRA VALU SUPERMARKETS INC

Principal Place of Business Mailing Address
3746 W. OAKLAND PARK BLVD
LAUDERDALE LAKES
FL 33311

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

6. Name and Address of Current Registered Agent

SAED MATTAR
18487 NW 23rd ST
PEMBROKE PINES FL 33029

4. FEI Number Applied For
65-0988577 Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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.

SIGNATURE *SAED MATTAR* DATE 10-18-01
(NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PRESIDENT
NAME SAED MATTAR
STREET ADDRESS 18487 NW 23rd ST
CITY-ST-ZIP PEMBROKE PINES FL 33029

TITLE SECRETARY
NAME ALGUNA MATTAR
STREET ADDRESS 18487 NW 23rd ST
CITY-ST-ZIP PEMBROKE PINES FL 33029

TITLE
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STREET ADDRESS
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STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME 100004679601
STREET ADDRESS -11/15/01--01002--020
CITY-ST-ZIP *****158.75 *****158.75

TITLE
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STREET ADDRESS
CITY-ST-ZIP LS

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CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *SAED MATTAR* DATE 10-18-01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

01 OCT 22 AM 11:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

CR2E034 (1/00)

Xtra Valu Supermarket, Inc.

(3746 West Oakland Park Blvd., Lauderdale Lakes)

Tel (954) 777-2980 Fax (954) 777-2951

October 17, 2001

Florida Department of State
Division of Corporations
409 East Gains Street
Tallahassee, FL 32399

Re: Corporation Annual Filing

Dear Sir or Madam:

I had a conversation with someone in your office yesterday regarding the fact that my corporation has been dissolved. In our discussion, I explained that no information has been received from your offices so that I may process the annual filing. I was then told to go on line at www.sunbiz.org and download a copy of what should have been received, a copy of the Uniform Business Report (UBR).

This form is attached and a copy of our company check for the annual fee (\$150.00) and certificate of status (\$8.75), totaling \$158.75 is enclosed.

I will be deeply indebted to you for helping me complete this process and continuing my corporation on active status. I can assure you that this would not have been a problem, had this form been received.

Thanks again for your help in this matter.

Respectfully yours,



Saed Mattar
President