

# 2001 UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT #** PL0000086957  
**1. Entity Name**  
 West Indian American Grocery, Inc.

**Principal Place of Business**  
 4975 N S Rd 7  
 Tamarac, FL 33319

**Mailing Address**  
 4975 N S Rd 7  
 Tamarac, FL 33319

**2. Principal Place of Business**  
 4975 N S Rd 7  
 Suite, Apt. #, etc.

**3. Mailing Address**  
 4975 N S Rd 7  
 Suite, Apt. #, etc.

**City & State**  
 Tamarac FL

**City & State**  
 Tamarac FL

**Zip**  
 33319

**Country**  
 Broward

**Zip**  
 33319

**Country**  
 Broward

**6. Name and Address of Current Registered Agent**  
 Agnes Essien  
 4975 N S Rd 7  
 Tamarac, FL 33319

**7. Name and Address of New Registered Agent**  
 Name: AGNES ESSIEN  
 Street Address (P.O. Box Number is Not Acceptable):  
 4975 N S Rd 7  
 City: Tamarac FL Zip Code: 33319

**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** *Agnes Essien*  
 Signature, typed or printed name of registered agent and title if applicable (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**

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		Director AGNES ESSIEN 4975 N S Rd 7 Tamarac, FL 33319	
		Manager Stella Essien 4975 N S Rd 7 Tamarac, FL 33319	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
		Treasurer Grace Essien 4975 N S Rd 7 Tamarac, FL 33319	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
		Supervisor- Produce Amaeka Essien 4975 N S Rd 7 Tamarac, FL 33319	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		<del>President Emmanuel Essien 4975 N S Rd 7 Tamarac, FL 33319</del>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
		<del>Chief D.A. Essien - Founder 4975 N S Rd 7 Tamarac, FL 33319</del>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

**13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:** *Agnes Essien* AGNES ESSIEN  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED**  
 01 SEP--4 AM 9:05  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA  
 400004587374--8  
 09/13/01--01061--021  
 \*\*\*\*\*62.00 \*\*\*\*\*62.00  
 DO NOT WRITE IN THIS SPACE

**4. FEI Number**  
 65-1032665

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

**10. Election Campaign Financing** ☐ **\$5.00 May Be Added to Fees**

CR2E034 (11/00)