

FILED

03 SEP -2 AM 8:43

7/28/2003-90138-034-\$158.75-\$158.75

7/28/

SECRETARY OF STATE
TALLAHASSEE, FLORIDA**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # P00000089824**

1. Entity Name

PENNY SAVER SUPERMARKETS, INC.

Principal Place of Business 19850 NW 9TH DRIVE PEMBROKE PINES FL 33029	Mailing Address 19850 NW 9TH DRIVE PEMBROKE PINES FL 33029
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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4. FEI Number 65-1041877	Applied For Not Applicable
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5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

ASAD, WAFA
19850 NW 9TH DRIVE
PEMBROKE PINES FL 33029

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  DATE

FILE NOW!!! FEE IS \$350.00

After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State9. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP		TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
	ASAD, WAFA	19850 NW 9TH DRIVE	PEMBROKE PINES FL 33029	☐ Delete					☐ Change ☐ Addition
				☐ Delete					☐ Change ☐ Addition
				☐ Delete					☐ Change ☐ Addition
				☐ Delete					☐ Change ☐ Addition
				☐ Delete					☐ Change ☐ Addition
				☐ Delete					☐ Change ☐ Addition
				☐ Delete					☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED**

7/23/03

CR2034 (4/03)

7/23/03

FROM: NOHA ASAD
TEL- 954-442-8448
FAX: 850-245-6017
ATTN: JUSTIN,

I AM WRITING THIS LETTER
IN REFERENCE TO CORP.

P00000089824 - PENNY SAUER
P980000048865 - WORLD LINK
P990000030603 - NETWORK PROPERTY

THESE CORPORATIONS WERE
RENEWED AT THE SAME TIME WITH
ONE CHECK, WHICH WASN'T RECEIVED
SO I WAS TOLD TO STOP PAYMENT
AND RESEND PAYMENT WITH A LETTER
TO AVOID LATE FEE, I DID
TWICE ONE CORPORATION GOT RENEWED
BUT THESE THREE DID, PLEASE
RENEW THEM.

PLEASE CALL ME
954-442-8448