


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 26, 2005 08:00 AM
Secretary of State

DOCUMENT # P00000101039 1. Entity Name ABC MINIMART & DELI, INC.	
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Principal Place of Business 1012 SW 10TH ST. DELRAY BEACH, FL 33444	Mailing Address 1012 SW 10TH ST. DELRAY BEACH, FL 33444
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DO NOT WRITE IN THIS SPACE



07272005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-1051030	Applied For Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent KARIM, SANIA 1012 SW 10TH ST. DELRAY BEACH, FL 33444	DO NOT WRITE IN THIS SPACE
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**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

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

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PS KARIM, SANIA 3855 SABAL LAKE ROAD DELRAY BEACH, FL 33445
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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U00000377222
08/26/05-80005-006 158.75

**DO NOT WRITE
IN THIS SPACE**

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Sania Karim
8/23/05, 561-2783486