

1072

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P01066048745

1. Entity Name

DADE CITY EXPRESS FOOD MART INC.

FILED

02 NOV 21 PM 5:06

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

3711 LOCK ST

Suite, Apt. #, etc.

3. Mailing Address

3711 LOCK ST

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

DADE CITY, FL

City & State

DADE CITY, FL

4. FEI Number

59-3726810

Applied For  
Not Applicable

Zip

33525

Country

USA

Zip

33525

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

YOUSSEFF BOUDIB

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

1259 SAND LAKE CT

City

TAMPA

FL

Zip Code

33613

**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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

700009149977

11/21/02--01064--007 \*\*\*150.00

DATE

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

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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  
NAME  
DPS  
STREET ADDRESS  
AHLAM BOUDIB  
CITY- ST- ZIP  
1259 SAND LAKE CR  
TAMPA, FL 33613

TITLE  
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CITY- ST- ZIP

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Ahlam Boudib

AHLAM BOUDIB

11/13/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)

2082

**DADE CITY EXPRESS FOOD MART INC**  
35711 LOCK ST  
DADE CITY FL 33525

November 13, 2002

Florida Department of State  
Annual Reports Filings  
Division of Corporations  
P.O.Box 6327  
Tallahassee, FL 32314

Dear Sir/Madam:

In a review of our corporation standing with the Department of State, we have found that you have administratively dissolved the corporation. We have not received any previous notices regarding the Uniform Business Report. Please note that this is our first year of operation. Accordingly, we are requesting a waiver of charges for this notice, and the amount due of the first notice, as it was listed, will be paid.

Your cooperation in this matter is greatly appreciated. For any further information please call me at 813-978-1104 or our accountant at 813-899-9642.

Sincerely,

*Ahlam Boudib*

Ahlam Boudib  
President