


2003 **FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

FILED

03 FEB 28 AM 11:34

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P01000057782 1. Entity Name  LIBERTY FOOD MART, INC.	
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**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business <b>3490 POLYNESIAN ISLE BLVD.</b>  Suite, Apt. #, etc.	3. Mailing Address <b>7345 SANDLAKE ROAD</b>  Suite, Apt. #, etc. <b>SUITE 412</b>  City & State <b>ORLANDO, FL</b>  Zip <b>32819</b>  Country <b>USA</b>
City & State <b>KISSIMMEE, FL</b>  Zip <b>34746</b>  Country <b>USA</b>	

400013696084  
03/07/03--01062--018 \*\*150.00

DO NOT WRITE IN THIS SPACE

4. FEI Number <b>59-3724447</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

**DO NOT WRITE  
IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

Name <b>MOWAFAQ TBAKHI</b>
Street Address (P.O. Box Number is Not Acceptable)  <b>2627 CATHAM CIRCLE</b>
City <b>KISSIMMEE</b>
FL <b>FL</b>
Zip Code <b>34741</b>

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.

**MOWAFAQ TBAKHI -407-397-9888**

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

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PRES/DIR - MOWAFAQ TBAKHI 2627 CATHAM CIRCLE KISSIMMEE, FL 34746</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>400013696084 03/07/03--01062--017 **150.00</b>
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12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:  **MOWAFAQ TBAKHI** 407 397 9888  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/02)

*payee*

# LIBERTY FOOD MART

7345 SAND LAK RD SUITE 412  
ORLANDO, FL 32819

January 29, 2003

State of Florida  
Division of Corporations  
Tallahassee, FL

REF: LIBERTY FOOD MART, INC.  
P01000057782

To Whom It May Concern:

Enclosed herewith is an application for reinstatement for the above captioned corporation, which has been administratively dissolved as a result of failure to file an annual report.

We thought the report had been filed in a timely manner but upon checking the corporation status on line we found that it was been administratively dissolved. We never received any notices and ask that this payment and a copy of the originally filed UBR be accepted and that the corporation be reinstated with an abatement of any corresponding penalties.

Thank you for your attention and anticipated corporation in this matter.

Sincerely,

Mowafaq Tbakhi

Enclosures