FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (IJBR)

DOCUMENT # PO1000087181 FILED 02 DEC 13 PM 3: 20 DIAMOND SUPER MARKET, INC. SECRETARY OF STATE CAN BE STATE FOR THE DO NOT WRITE IN THIS SPACE 000009500480 12/13/02--01020--015 **150.00 3. Mailing Address. 2. Principal Place of Business 1222 SCOTT STREE Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number 59_3743143 Applied For City & State 160'ET 3 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 33605 Fee Required 7. Name and Address of Current Registered Agent Name SAMER SALEH DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE it for the purpose of changing its registered office or registered agent, or both, in the State of Florida. ANIER SALEM (NOTE: Registered Agent signature required when reinstating) Signature, typed of January 1 - May 1 Fee is \$150.00 After May 1, Eee is \$550.00 Amended UBR is \$61.25 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. CR2E034B (12/01 MAME AT A MILE 96,57,0 MARKE uer s STREET ADDRESS STREET ADDRESS chylist ie (*) CITY-ST-7IP TIFLE NAME TITLE NAME STREET ADDRESS STREET ADDRESS CITY-STOZIF 338 CHY-ST-ZIP TITLE TO A MILL NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE <u>.0114-51-7</u>14. IN THIS SPACE HILE NAME NAME. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 🐍 CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS STREET ADDRESS City-ST-2P CHY-ST- AP mu NAME STREET ADDRESS STREET ADDRESS LIY SEZIE CITY-ST-ZIP 13. Thereby certify that the information supplied with this filling 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 true tee ampowered to execute this report as required by Chapter 607, Florida Statutes: and that my name appears in Block 11 or on an of the corporation of the receiver or trustee attachment with an address, with all other li samer saleh SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DIAMOND SUPER MARKET, INC. 1222 SCOTT STREET TAMPA, FL 33602

December 2, 2002

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

Dear Sir/Madam:

This letter is in regards to our receipt of the Notice of Administrative Dissolution or Revocation. 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 813-223-4612.

Sincerely,

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Samer Saleh President