

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 14, 2003 8:00 am
Secretary of State

02-14-2003 90215 037 ***150.00

DOCUMENT # P02000022371

1. Entity Name
CALLAWAY FOOD MART, INC.



Principal Place of Business
6707 CHERRY STREET
PANAMA CITY FL 32404

Mailing Address
6707 CHERRY STREET
PANAMA CITY FL 32404



2. Principal Place of Business
CALLAWAY FOOD MART

3. Mailing Address
6707 CHERRY ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State
PANAMA CITY, FL

City & State

4. FEI Number
03-0398217

Applied For
Not Applicable

Zip
32404

Country
BAV

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

WILLIAMS, JACK G
502 HARMON AVENUE
PANAMA CITY FL 32401

7. Name and Address of New Registered Agent

Name
ADLI HAMDAN

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

6707 CHERRY ST

City
PANAMA CITY

FL

Zip Code
32404

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 *Adli A. Hamdan* **ADLI A. HAMDAN PRESIDENT**

2/13/03

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE
PRESIDENT ☐ Delete
NAME
ADLI A. HAMDAN
STREET ADDRESS
6707 CHERRY ST.
CITY-ST-ZIP
PANAMA CITY FL 32404

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
SECRETARY ☐ Change ☒ Addition
NAME
AWATEF A. HAMDAN
STREET ADDRESS
6707 CHERRY ST
CITY-ST-ZIP
PANAMA CITY FL 32404

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

SIGNATURE: *Adli A. Hamdan* **ADLI A. HAMDAN**

2/13/03

850-8715707
973-9310294

Date

Daytime Phone #

CR2F034 (10/02)