

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 02, 2003 8:00 am
Secretary of State

05-05-2003 91400 021 ***150.00

DOCUMENT # P02000056496

1. Entity Name
SOUTH PARK GROCERY, INC.



Principal Place of Business
**443-445 S PARK AVE
TITUSVILLE FL 32780**

Mailing Address
**443-445 S PARK AVE
TITUSVILLE FL 32780**

32796

55045773



2. Principal Place of Business
443-445 S. PARK AVE
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
TITUSVILLE FLA.

City & State
FLA

4. FEI Number

☐ CHECK HERE IF MAKING CHANGES

Applied For
Not Applicable

Zip
32796

Country
FLORIDA

Zip

Country

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KHALIL, ALAA E
443-445 S PARK AVE
TITUSVILLE FL 32780

FEI NO.

01-0699977

32796

Name
HALA TABIDI

Street Address (P.O. Box Number is Not Acceptable)
443-445 S. PARK AVE

Titusville FL 32780

City

FL

Zip Code

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
HALA TABIDI

Hala Talibi

5-30-03 4-14-2003

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

(NOTE: Registered Agent signature required when re-registering)

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
Trust Fund Contribution.

☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
KHALIL, ALAA E
443-445 S PARK AVE
TITUSVILLE FL 32780 32796

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PVST
KHALIL, ALAA E
443-445 S PARK AVE
TITUSVILLE FL 32780 32796

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
HALA TABIDI
443-445 S. PARK AVE
Titusville FL 32780

☒ Change

Addition

☐ Change

☐ Addition

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☐ Addition

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: **HALA TABIDI**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Hala Talibi

4-14-2003

321-264-4424

5-30-03

Daytime Phone #

CR2E034 (10/02)