

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

FILED
Apr 03, 2003 8:00 am
Secretary of State

04-03-2003 90150 036 ***150.00

DOCUMENT # P02000079219

1. Entity Name

ANWARA FOOD MART, INC. ✓

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1600 14th AVENUE

Suite, Apt. #, etc.

3. Mailing Address

1600 14th AVENUE

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

VERO BEACH, FL

City & State

VERO BEACH, FL

4. FEI Number

22-3858905

Applied For

Not Applicable

Zip

32960

Country

USA

Zip

32960

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

JKM SYEEDUR RAHMAN

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

1600, 14th AVENUE

City

VERO BEACH

FL

Zip Code

32960

**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)

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 P/D
NAME JKM SYEEDUR RAHMAN
STREET ADDRESS 1600, 14th AVENUE
CITY-ST-ZIP VERO BEACH, FL 32960

TITLE VP
NAME SAYED SB AHMED
STREET ADDRESS 1600, 14th AVENUE
CITY-ST-ZIP VERO BEACH, FL 32960

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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)(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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

JKM S. P.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/29/2003

Date

772-633-0375

Daytime Phone #

CR2E034B (12/01)