2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000087223

Entity Name: CASH & CARRY OF BROWARD, INC.

FILED May 01, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

751 NE 44TH CT 1660 NW 3RD STREET

FORT LAUDERDALE, FL 33334 DEERFIELD BEACH, FL 33442

Current Mailing Address: New Mailing Address:

P.O. BOX 4082 1660 NW 3RD STREET

DEERFIELD BEACH, FL 33442 DEERFIELD BEACH, FL 33442

FEI Number: 13-4216650 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KHAN, RANA GILLESPIE, R.BOWEN III

18344 CORAL SANDS WAY 1515 SOUTH FEDERAL HIGHWAY

BOCA RATON, FL 33498 US SUITE 306

BOCA RATON, FL 33432 US

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: R.B. GILLESPIE 05/01/2005

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

election campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PSD (X) Change () Addition

 Name:
 KHAN, MOHAMMED D
 Name:
 KHAN, MOHAMMED D

 Address:
 10245 LA REINA RD.
 Address:
 10245 LA REINA RD.

 City-St-Zip:
 DELRAY BEACH, FL 33446
 City-St-Zip:
 DELRAY BEACH, FL 33446

Title: VD (X) Delete Title: () Change () Addition

 Name:
 RAHMAN, ATM A
 Name:

 Address:
 515 NW 34 STREET #204
 Address:

 City-St-Zip:
 POMPANO BEACH, FL 33064
 City-St-Zip:

Title: SD (X) Delete Title: () Change () Addition

 Name:
 KHAN, RANA
 Name:

 Address:
 18344 CORAL SANDS WAY
 Address:

 City-St-Zip:
 BOCA RATON, FL 33498
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MOHAMMED D KHAN P 05/01/2005