2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000114855

Entity Name: NPB FOOD MART INC.

FILED Apr 27, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1013 W. DIXIE AVE LEESBURG, FL 32763

Current Mailing Address: New Mailing Address:

1013 W. DIXIE AVE LEESBURG, FL 32763

FEI Number: 06-1653534 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:

SHIL, NARESH C 1013 W. DIXIE AVE. LEESBURG, FL 34748 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: NARESH C SHIL

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 ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: PS (X) Change () Addition

 Name:
 SHIL, NARESH C
 Name:
 SHIL, NARESH C

 Address:
 1013 W. DIXIE AVE.
 Address:
 1013 W. DIXIE AVE.

 City-St-Zip:
 LEESBURG, FL 34748
 City-St-Zip:
 LEESBURG, FL 34748

Title: V () Delete Title: VPT (X) Change () Addition

Name:CHOWDHURY, BADALName:CHOWDHURY, BADALAddress:1013 W. DIXIE AVE.Address:1013 W. DIXIE AVE.City-St-Zip:LEESBURG, FL 34748City-St-Zip:LEESBURG, FL 34748

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

 Name:
 HOSSAIN, MOHAMMED I
 Name:

 Address:
 1013 W. DIXIE AVE.
 Address:

 City-St-Zip:
 LEESBURG, FL 34748
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: NARESH C SHIL PS 04/27/2009