## 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P03000014860

Entity Name: MLK FOOD STORE INC.

FILED Apr 06, 2007 Secretary of State

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

3450 45TH ST 3450 45TH ST

VERO BEACH, FL 32960 VERO BEACH, FL 32967

Current Mailing Address: New Mailing Address:

3450 45TH ST 3450 45TH ST

VERO BEACH, FL 32960 VERO BEACH, FL 32967

FEI Number: 57-1149744 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:

ALSAYED, MAHMOUD S
3450 45TH ST

ALSAYED, MAHMOUD S
3450 45TH ST

VERO BEACH, FL 32960 US VERO BEACH, FL 32967 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: MAHMOUD ALSAYED 04/06/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 ALSAYED, MAHMOUD S
 Name:
 ALSAYED, MAHMOUD S

 Address:
 3450 45TH ST
 Address:
 2416 45TH ST

City-St-Zip: VERO BEACH, FL 32960 City-St-Zip: VERO BEACH, FL 32967

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

 Name:
 ALSAYED, AMNEH S
 Name:
 ALSAYED, AMNEH S

 Address:
 3450 45TH ST
 Address:
 2416 45TH ST

City-St-Zip: VERO BEACH, FL 32960 City-St-Zip: VERO BEACH, FL 32967

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

 Name:
 Name:
 ALSAYED, FADI

 Address:
 Address:
 2416 45TH ST

 City-St-Zip:
 City-St-Zip:
 VERO BEACH, FL 32967

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

 Name:
 Name:
 ALSAYED, MOHAMMAD

 Address:
 Address:
 2416 45TH ST

 City-St-Zip:
 City-St-Zip:
 VERO BEACH, FL 32967

I hereby certify that the information supplied with this filing does not qualify for the 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: ALSAYED MAHMOUD P 04/06/2007