## 2005 FOR PROFIT CORPORATION

## May 04, 2005 8:00 am Secretary of State ANNUAL REPORT 05-04-2005 90117 016 \*\*\*150.00 **DOCUMENT # P04000014584** 1. Entity Name BETHUNE VILLAGE FOOD, INC. Principal Place of Business Mailing Address 40080 135 835 DR. MARY MECLUDE, BEHTUME BLVD. 835 DR. MARY MECLUDE, BEHTUME BLVD. DAYTONA BEACH, FL 32114 DAYTONA BEACH, FL 32114 2. Principal Place of Business 3. Mailing Address Suite Ant # etc. Suite, Apt. #, etc. 05022005 CR2E034 (10/03) Chg-P City & State City & State 4. FEI Number Applied For <u>30022</u>8143 Not Applicable Zip Zio \$8.75 Additional Country Country 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent KHAN, RIPON 835 DR. MARY MECLUDE, BEHTUME BLVD. Street Address (P.O. Box Number is Not Acceptable) DAYTONA BEACH, FL 32114 City Zip Code FL 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\_ Signature, typed or printed name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Trust Fund Contribution. Added to Fees Due by September 7, 2005 OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PRESIDENT D OHE ☐ Delete TITLE RIPON KHAN KHAN, RIPON HAME NAME 835 DR. MARY MECLUDE, BETHUNE BLYD STREET ADDRESS 835 DR. MARY MECLUDE, BEHTUME BLVD. STREET ADORESS CITY ST-ZIP DAYTONA BEACH, FL 32114 CITY-ST-ZIP DAYTONA BEACH, FL. HILE Delete TITLE Addition ☐ Change ARIFUL SOHEL KHAN, MOHAMMED E NAME NAME 835 DR. MARY MECLUDE, BEHTUME BLVD. STREET ADDRESS STREET ADDRESS 5/A CITY+ST-ZIE DAYTONA BEACH, FL 32114 CITY-ST-ZIP SECRETERY D Delete TITLE ☐ Change **Addition** MOHAMMED MORSHED KAZI, ASIF NAME NAME STREET ADDRESS 835 DR. MARY MECLUDE, BEHTUME BLVD. STREET ADDRESS CITY+ST-ZIP DAYTONA BEACH, FL 32114 CITY-ST-ZIP TREASURER TITLE Delete Addition mie ☐ Change NAME NAME OMAR IMAM STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CiTY-S1-ZiP CHY-ST-7IP TITLE ☐ Delete ☐ Change Addition TITLE

FILED

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.

CITY-ST-ZIP

STREET ADDRESS

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: