

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000112921

Entity Name: ST. JOHNS FOOD STORE, INC.

FILED
Mar 23, 2006
Secretary of State

Current Principal Place of Business:

3980 HERSCHEL ST.
JACKSONVILLE, FL 32205 US

New Principal Place of Business:

Current Mailing Address:

3980 HERSCHEL ST.
JACKSONVILLE, FL 32205 US

New Mailing Address:

FEI Number: 20-1437140

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMPLIFIED BOOKKEEPING AND TAX SERV. INC.
6034 CHESTER AVE
108
JACKSONVILLE, FL 32217 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DIR () Delete
Name: KHAZAL, SAMIR
Address: 5427 HICKSON RD.
City-St-Zip: JACKSONVILLE, FL 32207

Title: DIR () Delete
Name: KHAZAL, MERNA
Address: 5427 HICKSON RD
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DIR (X) Change () Addition
Name: KHAZAL, ESSA
Address: 5427 HICKSON RD
City-St-Zip: JACKSONVILLE, FL 32207

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: SAMIR KHAZAL

PRES

03/23/2006

Electronic Signature of Signing Officer or Director

Date