

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000117846

Entity Name: SOUTH BEACH GROCER INC.

FILED  
Jan 31, 2008  
Secretary of State

## Current Principal Place of Business:

8045 BRACKEN LN  
MELBOURNE, FL 32940 US

## New Principal Place of Business:

## Current Mailing Address:

8045 BRACKEN LN  
MELBOURNE, FL 32940 US

## New Mailing Address:

FEI Number: 20-1489959

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AHSAN, SANZIDA  
8045 BRACKEN LN  
MELBOURNE, FL 32940 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: PDS ( ) Delete  
Name: AHSAN, SANZIDA  
Address: 8045 BRACKEN LN  
City-St-Zip: MELBOURNE, FL 32940 US

Title: S (X) Delete  
Name: ISLAM, MD ZUAL  
Address: 3322 SW 39TH STREET  
City-St-Zip: OCALA, FL 34474

Title: VP ( ) Delete  
Name: AHSAN, SOHEL  
Address: 5895 WEST HIGHWAY 40  
City-St-Zip: OCALA, FL 34482

Title: VP (X) Delete  
Name: AHSAN, MOHAMMED M  
Address: 3 MIDWAY TRACK PL.  
City-St-Zip: OCALA, FL 34472

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: SANZIDA AHSAN

PDS

01/31/2008

Electronic Signature of Signing Officer or Director

Date