2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2009
Secretary of State

DOCUMENT# P05000067157

Entity Name: POWER FOOD MARKET NO. 2, INC

Current Principal Place of Business:

977 PALM AVE
HIALEAH, FL 330104016

New Principal Place of Business:

Current Mailing Address:

977 PALM AVE
HIALEAH, FL 330104016

New Mailing Address:

FEI Number: 22-3913977 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SELKHI, BURHAN
14566 NW 22ND AVE
OPA LOCKA, FL 33054 US

Name and Address of New Registered Agent:

SELKHI, SAMIR
977 PALM AVE
HIALEAH, FL 33010 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: SAMIR SELKHI 01/08/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PDT ( ) Delete
Name: SELKHI, SAMIR F
Address: 977 PALM AVE
City-St-Zip: HIALEAH, FL 330104016

Title: VSD ( ) Delete
Name: SELKHI, BURHAN F
Address: 14951 S.W. 20TH STREET
City-St-Zip: MIRAMAR, FL 33027

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition
Name: SELKHI, SAMIR F
Address: 977 PALM AVE
City-St-Zip: HIALEAH, FL 330104016

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: SAMIR SELKI P 01/08/2009
Electronic Signature of Signing Officer or Director Date