

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000161118

FILED
Aug 16, 2006
Secretary of State

Entity Name: CELERY KWIK FOOD, INC.

Current Principal Place of Business:

1419 CELERY AVENUE
SANFORD, FL 32711 US

New Principal Place of Business:

Current Mailing Address:

1419 CELERY AVENUE
SANFORD, FL 32711 US

New Mailing Address:

FEI Number: 20-4315151

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOSSAIN, ANWAR
2 SYCAMORE COURT
101
WINTER SPRINGS, FL 32708 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BEGOM, SURAYA
Address: 248 MAGNOLIA PARK TR
City-St-Zip: SANFORD, FL 32773 US

Title: VP () Delete
Name: HOSSAIN, ANWAR
Address: 2 SYCAMORE COURT # 101
City-St-Zip: WINTER SPRINGS, FL 32708 US

Title: SEC () Delete
Name: BHUIYAN, SHABNAM M
Address: 1007 VIA COMO PLACE
City-St-Zip: LAKE MARY, FL 32746 US

Title: TR () Delete
Name: MD. ISLAM, TARIQUL
Address: 4808 JEANETTE CT
City-St-Zip: ST CLOUD, FL 34771 US

Title: TR () Delete
Name: MOLLA, TANIA T
Address: 2 SYCAMORE COURT 101
City-St-Zip: WINTER SPRINGS, FL 32708 US

Title: TR () Delete
Name: BECKETT, SAHIDA
Address: 5202 POND CREST LN
City-St-Zip: SANFORD, FL 32773 US

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:

Title: TR (X) Change () Addition
Name: SATTAR, KAZI
Address: 500 KEY HAVEN DRIVE
City-St-Zip: SANFORD, FL 32771 US

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

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: SURAYA BEGOM

P

08/16/2006

Electronic Signature of Signing Officer or Director

Date