FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998 DIVISION OF COMMENT # P9200009200 (6)

MAC'S GROCERY, INC.

Principal Place of Business 16968 CHARLESON AVENUE INDIANTOWN FL 34956

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

SIGNATURE:

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Mailing Address

2a. Mailing Address

City & State

Suite, Apt. #, etc.

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Country

ABDALLAH, MOHAMMAD

9. Name and Address of Current Registered Agent

P.O. BOX 7244 INDIANTOWN FL 34956

FILED Feb 09 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

8. This corporation owes or has paid the current year Intangible

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Yes

Not Applicable

 Date Incorporated or Qualified 11/30/1992

59-3153109

5. Certificate of Status Desired

6. Election Campaign Financing

Personal Property Tax due June 30.

10. Name and Address of New Registered Agent

Trust Fund Contribution

16968 CHARLESON AVENUE			82	Street Address (P.O. Box Number Is Not Acceptable)		
INDIANTOWN FL 34956			83			
			84	City	FL 85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE						
				nt signature	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.	CD CPPICERS AND DIRECTORS	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICEAS AND DIRECTORS IN 12	
NAME	ABDALLAH, MOHAMMAD		1.2 NAME			
STREET ADDRESS	16968 CHARLESON AVENUE		1.3 STREET	ADDDECC		
	INDIANTOWN FL 34956			1		
CITY-ST-ZIP	VP	DELETE	1.4 CITY-S' 2.1 TITLE	- ZIP	☐ Change ☐ Addition	
NAME	RIAD ABDALLAH	5000000	2.2 NAME	- {		
STREET ADDRESS	207 SE 1ST ST		2.3 STREET	ADDRESS		
CITY-ST-ZIP	DANNIA FL 33004		2.4 CITY - S			
TITLE	S	DELETE	3.1 TITLE	1-211	☐ Change ☐ Addition	
NAME	ABDALLAH, ASAD		3.2 NAME	Ì		
STREET ADDRESS	207 S.E. 1ST ST		3.3 STREET	ADDRESS		
CiTY-ST-ZIP	DANIA FL		3.4. CITY-S			
TITLE	0.14.0	DELETE	4,1 TITLE	1 24	☐ Change ☐ Addition	
NAME			4. 2 NAME	ı	_ ' _ i	
STREET ADDRESS			4.3 STREET	ADDRESS		
CITY-ST-ZIP			4.4 CITY-SI	-7IP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME	1		
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY-\$1	- ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition	
NAME			6.2 NAME	}		
STREET ADDRESS			6.3 STREET	NDDRESS	ļ	
CITY-ST-ZIP			6.4 CITY-ST			
14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.						

et EMohammad Abdallah

Country

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