

05-01-2002 91565 006 \*\*\*150.00

**FOR PROFIT CORPORATION**  
**UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P93000053077  
 1. Entity Name  
 Sunny Food Store, Inc.

**DO NOT WRITE IN THIS SPACE**

642996

2. Principal Place of Business  
 1033 Silver Beach Rd.  
 Suite, Apt. #, etc.

3. Mailing Address  
 4631 Cherry Rd.  
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
 Riviera Beach

City & State  
 West Palm Beach

Zip  
 33404

Country  
 USA

Zip  
 33417

Country  
 USA

4. FEI Number  
 65-0427015

Applied For  
 Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name  
 Samier Abdo

Street Address (P.O. Box Number is Not Acceptable)  
 4631 Cherry Rd.

City  
 West Palm Beach

State  
 FL

Zip Code  
 33417

8. 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: X Samier G. Abdo

Signature typed or printed name of registered agent and this if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.

January 1 - May 1 Fee is \$180.00  
 After May 1, Fee is \$550.00  
 Amended UBR is \$61.25  
 Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-STATE-ZIP	Basima Abdo D/P 4631 Cherry Rd. West Palm Beach, FL 33417
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	DIS Samier Abdo 4631 Cherry Rd. West Palm Beach, FL 33417
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**DO NOT WRITE IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes, I further certify that the information indicated on this report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: X Samier G. Abdo

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-18-2002

DATE

Daytime Phone #

CR2E034B (12/01)