


FILED
Apr 16, 2004 08:00 AM
Secretary of State

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P93000053077 1. Entity Name SUNNY FOOD STORE, INC.	
---	---

Principal Place of Business 1033 SILVER BEAH RD RIVIERA BEACH, FL 33404 US	Mailing Address 5002 N. SAN ANDROS WEST PALM BEACH, FL 33411 US
---	--

DO NOT WRITE IN THIS SPACE



04132004 No Chg-P CR2E034 (10/03)

4. FCI Number 65-0427015	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent ABDO, SAMIER 4631 CHERRY ROAD WEST PALM BEACH, FL 33417

DO NOT WRITE IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when re-issuing) _____ DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees

U00000115863
 04/16/04-80040-021 150.00

10. OFFICERS AND DIRECTORS	
TITLE	D/P
NAME	ABDO, BASIMA F
STREET ADDRESS	5002 N. SAN ANDROS
CITY- ST- ZIP	WEST PALM BEACH, FL 33411
TITLE	D/S
NAME	ABDO, SAMIER
STREET ADDRESS	5002 N. SAN ANDROS
CITY- ST- ZIP	WEST PALM BEACH, FL 33411
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(c), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.