

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000086394

1. Entity Name
A-1 FOODS, INC.

Principal Place of Business
7832 W. SAMPLE RD.
MARGATE FL 33063

Mailing Address
7832 W. SAMPLE RD.
MARGATE FL 33063

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0461686

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ANWAR, ZAHID
7832 W. SAMPLE RD.
MARGATE FL 33063

Name

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

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title 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.
(See criteria on back)

FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
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

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PTD
LIAQUAT, ALI
7832 W. SAMPLE RD.
MARGATE FL 33063

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
REHANA LIAQUAT, ALI
6061 S.W. 38 CT., #B
DAVIE FL 33314

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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13. 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 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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE REQUIRED

09/17/01

DATE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

CR2E034 (5/01)

A-1 FOODS, INC.
7832 W. Sample Road
Margate, FL 33063

Attachment
979329

#P93000086394

To: The Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Reg: Uniform Business Report.

Dear Sir/Madam:

I the undersigned state the following:

That during the month of January 2001, I had to be traveling outside the United States. My previous accountant, (S&M Accounting Services) picked up all reports/documents but never acted upon the important issues. During the month of July when I asked about the second notice, he advised me not to be concerned as the UBR has been filed. A hand written notation advising us not to mail (a copy of which is enclosed herewith).

Very recently we have engaged the professional accounting (BACS). Upon reviewing the documents and verifying the status of the corporation, they have advised us that the UBR had not been filed.

I had not seen or had the possession the UBR 2001 notice, and therefore, I request the Department to kindly waive the penalty. A check in the amount of \$150.00 is enclosed herewith.

Thank you very much.

Sincerely,

Liaquat Ali
President