

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000087883

Entity Name: M & M FOOD STORE, INC.

FILED  
Jan 15, 2004  
Secretary of State

## Current Principal Place of Business:

21101 NW 37TH AVE  
MIAMI, FL 33056

## New Principal Place of Business:

## Current Mailing Address:

21101 NW 37TH AVE  
MIAMI, FL 33056

## New Mailing Address:

FEI Number: 65-0456139

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RAMADAN, RIDA  
21101 NW 37TH AVE  
MIAMI, FL 33056 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ALMAARI, RANA ALI  
Address: 21101 NW 37TH AVENUE  
City-St-Zip: OPA LOCKA, FL 33056

Title: PSD ( ) Delete  
Name: SILVA, OSCAR F  
Address: 21101 NW 37TH AVENUE  
City-St-Zip: OPA LOCKA, FL 33056

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: RAMADAN, RIDA  
Address: 21101 NW 37TH AVENUE  
City-St-Zip: OPA LOCKA, FL 33056

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

Title: D ( ) Change (X) Addition  
Name: RAMADAN, HASSAN  
Address: 21101 NW 37 AVENUE  
City-St-Zip: OPA LOCKA, FL 33056

I hereby certify that the information supplied with this filing does not qualify for the 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 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: OSCAR SILVA

P

01/15/2004

Electronic Signature of Signing Officer or Director

Date