

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Suzanne B. Matheson
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000074993 (3)

1. Corporation Name

PADMA FOOD MART, INC.



Principal Place of Business

11211 S. MILITARY TR
SUITE 2721
BOYNTON BEACH FL 33436

Mailing Address

11211 S. MILITARY TR
SUITE 2721
BOYNTON BEACH FL 33436

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

25

30

9. Name and Address of Current Registered Agent

NAHID, FATIMA
11211 S. MILITARY TR.
SUITE 2721
BOYNTON BEACH FL 33436

81

Name

82

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

83

84

City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0102 and 607.1508, 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 607.0106, Florida Statutes.

SIGNATURE

Signature of Registered Agent (Print Name and Title)

Signature of Registered Agent (Print Name and Title)

DATE

12. OFFICERS AND DIRECTORS

12.1	NAME	STREET ADDRESS	CITY-STATE-ZIP	12.2	NAME	STREET ADDRESS	CITY-STATE-ZIP
12.1	PSD	NAHID, FATIMA	11211 S. MILITARY TR SUITE 2721 BOYNTON BEACH FL 33436	☒	DELETE		
12.1	VTD	MAH, MOHAMMAD M	11211 S. MILITARY TR SUITE 2721 BOYNTON BEACH FL 33436	☐	DELETE		
12.1				☐	DELETE		
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12.1				☐	DELETE		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1	NAME	STREET ADDRESS	CITY-STATE-ZIP	13.2	NAME	STREET ADDRESS	CITY-STATE-ZIP
13.1	PRESIDENT	MANZURUL ISLAM	11211 S. MILITARY TR APT #2721 BOYNTON BEACH FL 33436	☒	Change	☒	Addition
13.1				☐	Change	☐	Addition
13.1				☐	Change	☐	Addition
13.1				☐	Change	☐	Addition
13.1				☐	Change	☐	Addition
13.1				☐	Change	☐	Addition
13.1				☐	Change	☐	Addition
13.1				☐	Change	☐	Addition
13.1				☐	Change	☐	Addition
13.1				☐	Change	☐	Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplementary 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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-5-96

954-485-5811

CR2E034 (12/95)