FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000014659 (2)

MACDILL FOOD & DELI, INC.

FILED Feb 12 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				I (ODINOBI) (OB (OBNO DANA DDINI BRAN DEAM) ODIO	I TIBLI BOBIN BILET BIEND INTE INDI
8816 SOUTH MACDILL AVENUE 6616 SOUTH MACDILL AT TAMPA FL 33611		AVENUE	DO NOT WRITE IN TI	HIS SPACE	
1				3. Date Incorporated or Qualified	
- Barrier 17 6	The second secon	11.2		02/12/1996	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt #, etc		26 66 16 S. Macabill Ava Suite, Apt. #, etc.		59-3367058	Not Applicable
 		27]		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		8. Election Campaign Financing	\$5.00 May Be
23 Tamp9, FL -		28 Tampa, FL.		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24 336/1	9. Name and Address of Current	Penistered Agent	30 Hillsborge		Yes No
411		10. Name and Address of New Registe	ひとって		
ALHOMSI, AYMAN M 6616 SOUTH MACDILL AVENUE 82 Street Address				MADY HOUSE	MKHI
TAMPA FL 33611			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
'~	W V F 00011		83		
			84 City		las I 7: Cada
			Tan		FL 85 Zip Code \
11. Pursuant to the provisions of Sections 607.0502 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 607.0505, Florida Statutes.					
agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.					
SIGNATURE Company to the Standard Company and the of tipp seaton (NOTE Registered Agent signature required when reinstating) OATE					
12.	OF LICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE	ADDITIONS/STANGES TO CITICENS	Change Addition
NAME	BARAKAT, MAGDY		1.2 NAME		
STREET ADDRESS	6616 S MACDILL AVE		1.3 STREET ADDRESS		
CITY - ST - ZIP	TAMPA FL		1.4 CITY-ST-ZIP		
TITLE	VPD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	BARAKAT, WAEL		2.2 NAME		
STREET ADDRESS	6816 S MACDILL AVE		2.3 STREET ADDRESS		
CITY - ST - ZIP	TAMPA FL	Drutte	2.4 CITY-ST-ZIP		[] Obares [] Addition
TITLE	SD ALMA I MAGEER A	☐ DELETE	3.1 TITLE		Change Addition
NAME CYPECT ADDRESS	ALHAJ, NAGEEB A 6616 S MACDILL AVE		3.2 NAME		
STREET ADDRESS	TAMPA FL		3.3 STREET ADDRESS . 3.4. City-St-Zip		
CITY-ST-ZIP TITLE	TD	DELETE	3.4. CHY-SI-ZIP 4.1 TITLE		Change Addition
NAME	ALHAJ, NAGEEB A		4. 2 NAME		
STREET ADDRESS	6616 S MACDILL AVE		4.3 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL		4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE	•	Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		· ·
TITLE		DELE1E	6.1 TITL€		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST- ZIP		

14. 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 annual report or supplemental 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 on an attachment with an address.

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1/3/98

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