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

Mailing Address

4120 NW 26 ST

PROFIT CCRPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # **P97000024804**1. Corporat on Name

Principal Place of Business

4120 NW 26 ST

STAR FOOD STORES INC. I

LAUDERHILL FL	33313	LAUDERHILL FL 33313				DO NOT WRITE IN TH S	SDACE	=	
							SFACE		
						3. Date Incorporated or Qualifed 03/14/1997			
								Τ	ind Fan
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	<u> </u>	+	ied For
21		26				65-0770013	-		Applicable
Suite, Apt. 1	e, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired			Iditional
22	27							e Rec	
City & S ate City & State						6. Election Campaign Financing	\$5.00 May Be Added to Fees		
23	28					Trust Fund Contribution		ded to	Fees
Zip	Country	Zip				8. This corporation owes the current year Intangible			
24	25	29	30			Personal Property Tax.	Yes []No		
	9. Name and Address of Current	nt Registered Agent				10. Name and Address of New Registered	Agent		
1/1144				81	Name				
	N, MOHAMMAD S		82 Street Ac			dress (P.O. Box Number is Not Acceptable)			
	NW 26 ST		Sirect rick			0.000 (1.0., 20., 10., 10., 10., 10., 10., 10., 10., 1			
LAUE	DERHILL FL 33313		Ì	83					
							10-1	7:- 0	
				84	City	FL	85	Zip C	ode
44 Dureuant I	to the provisions of Sections 607 050	02 and 607 1508. Florida Sta	tutes, the al	DOVE	e-named ccr	rporation submits this statement for the purpose of	changir	ng its r	egistered
office c r re	egistered agent, or both, in the State	e of Florida. Such change was	sauthorized	DV 1	the corporal	tion's board of (lirectors. I hereby accept the appoint	ntment	as reg	stered
agent. ar	m familiar with, and at cept the obliga	ations of, Section 607.0505, i	riorida Statu	ites,	•	4-10-	97		
SIGNATURE	Relian	Hors-	T 5. B	•		G-10 ired when reinstating) DATE			
	Signature, typed or printed name of registered age	NI) DIRECTORS	13.	Ayent	(signature requir	ADDITIONS/CHANGES TO OFFICERS AN		CTOF	S IN 12
12.	D OFFICERS AI	DELETE	11 11	1 F		ABBITION OF INTOCO TO OFFICE AS	Cha		Addition
TITLE	_		1.2 NA					Ü	
NAME	HASSAN, REHANA		1						
STREET ADDRESS	4120 NW 26 ST				ADDRESS				
CITY-ST-ZIP	LAUDERHILL FL 33313		1.4 CIT		r-ZIP		Cha		Addition
TITLE		☐ DELETE	2 1 TIT					ange	
NAME			2.2 NA	ME	1				
STREET ADDRESS			2.3 ST	REET	ADDRESS				
CITY-ST-ZIP			2. 4 CI	TY-81	T-ZIP				
TITLE		☐ DELETE	3.1 TIT	le			Cha	ange	Addition
NAME			3 2 NA	ME					
STREET ADDRESS			3.3 ST	REET	ADDRESS				
CITY-ST-ZIP			3.4. Cf	TY-S	T-ZIP				
TITLE		☐ DELETE	4.1 TIT				Cha	ange	Addition
NAME			4, 2 N/	AME					
STREET ADDRESS					ADDRESS				
i			4.4 CF						
CITY-ST-ZIP		DELETE	5.1 TIT		1-2IF		[] Cha	ange	Addition
TITLE		- OFFELT	5.2 NA					v	_
NAME					ADDRESS				
STREET ADDRESS					ĺ				
CITY-ST-ZIP			5.4 CIT 6.1 TIT		1-412			2000	☐ Addition
TITLE		☐ DELETE					L] ∪na	ange	☐ AuditiO(1
NAME			6.2 NA						
OTDEET ADDDESOR			6.3 ST	REET	ADDRESS				

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.0'(3)(i), Florida Statutes. I further sertify 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 cath; 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 attactment with an address, with all other like empowered.

SIGNATURE:

FILED Apr 25, 1999 8:00 am Secretary of State

04-25-1999 90003 003 ***300.00