

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

FILED

02 APR 30 PM 12:45

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

<b>DOCUMENT #</b>	<b>P97000063725</b>
<b>1. Entity Name</b>	
<b>Tel-Aviv Food Mart, Inc.</b>	

<b>DO NOT WRITE IN THIS SPACE</b>
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<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>	
4397 N. PINE ISLAND RD		4397 N. PINE ISLAND RD	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State SUNRISE FL		City & State SUNRISE FL	
Zip 33351	Country	Zip 33351	Country

<b>4. FEI Number</b>	<b>650768255</b>	<b>Applied For</b>
		<b>Not Applicable</b>
<b>5. Certificate of Status Desired</b>		<input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>

<b>DO NOT WRITE IN THIS SPACE</b>
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<b>7. Name and Address of Current Registered Agent</b>	
Name <b>David Torchin, C.P.A.</b>	
Street Address (P.O. Box Number is Not Acceptable) <b>8211 West Broward Blvd.</b>	
Suite <b>200</b>	
City <b>Plantation</b>	FL <b>33324</b>

<b>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.</b>	
SIGNATURE 	<b>David Torchin, C.P.A.</b>
(NOTE: Registered Agent signature required when reinstating)	
DATE <b>4/22/02</b>	

<b>9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.</b> (See criteria on back) <input checked="" type="checkbox"/>	<b>January 1 - May 1 Fee is \$150.00</b> <b>After May 1, Fee is \$550.00</b> <b>Amended UBR is \$61.25</b> <b>Make Check Payable to Department of State</b>	<b>10. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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<b>11. OFFICERS AND DIRECTORS</b>			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>President/Director</b> <b>Uri Saiyag</b> <b>1782 Sycamore Terrace</b> <b>Weston, FL 33327</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>300005500809--9</b> <b>-05/09/02--01058--008</b> <b>*****61.25 *****61.25</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Vice-President/Director</b> <b>Lisa Saiyag</b> <b>1782 Sycamore Terrace</b> <b>Weston, FL 33327</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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<b>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 on an attachment with an address, with all other like empowered.</b>
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<b>SIGNATURE:</b> 	<b>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</b>	<b>Date</b>	<b>Daytime Phone #</b>
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CR2E034B (12/01)