

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 13, 2002 8:00 am
Secretary of State
 03-13-2002 90072 018 ***150.00

0260807 AV

DOCUMENT # P98000026929

1. Entity Name
FOOD ZONE #119, INC.

Principal Place of Business

9585 SW 160 ST
MIAMI FL 33313

Mailing Address

9585 SW 160 ST
MIAMI FL 33313

2. Principal Place of Business

9585 SW 160 ST

Suite, Apt. #, etc.

3. Mailing Address

9585 SW 160 ST

Suite, Apt. #, etc.

City & State

MIAMI FL

Zip Country

33157-3350

City & State

MIAMI FL

Zip Country

33157-3350

4. FEI Number

65-0828937

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SHEKHA, SHABEER

11665 N.E. 2ND AVENUE
NORTH MIAMI FL 33161

7. Name and Address of New Registered Agent

Name

SHEKHA SHABEER

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

9585 SW 160 STREET

City

MIAMI

FL

Zip Code

33157

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.

SIGNATURE

Shabbeer
 Signature, typed or printed name of registered agent and title if applicable

SHABEER SHEKHA PD

(NOTE: Registered Agent signature required when reinstating)

28 FEB 2002

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PD	☐ Delete
NAME	SHEKHA, SHABEER	
STREET ADDRESS	9585 SW 160 STREET	
CITY-ST-ZIP	MIAMI FL 33157	
TITLE	SD	☒ Delete
NAME	KARIM, IMRAN A	
STREET ADDRESS	9585 SW 160 STREET	
CITY-ST-ZIP	MIAMI FL 33157	
TITLE	DVP	☐ Delete
NAME	MAHAMMAD, NOOR	
STREET ADDRESS	9585 SW 160 STREET	
CITY-ST-ZIP	MIAMI FL 33157	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	SDVP	☒ Change ☐ Addition
NAME	MAHAMMAD NOOR	
STREET ADDRESS	9585 SW 160 STREET	
CITY-ST-ZIP	MIAMI FL 33157	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Shabbeer
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

28 FEB 2002

Date

(305) 256-8320

Daytime Phone #

CR2E034 (9/01)