

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 23, 2001 8:00 am
Secretary of State

07-23-2001 90003 027 ***150.00

0108178 AT

DOCUMENT # P99000038738
 1. Entity Name
LUCKY WAY FOOD STORES, INC.

Principal Place of Business Mailing Address
2101 HUSSON AVE. **2101 HUSSON AVE.**
PALATKA FL 32177 **PALATKA FL 32177**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address
 Suite/Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
 Zip Country Zip Country

4. FEI Number **59-3579147** Applied For
 Not Applicable
 5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
MOHD, KHALID A
2101 HUSSON AVE.
PALATKA FL 32177

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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 NAME STREET ADDRESS CITY-ST-ZIP | P MOHD, KHALID 200 JUNIOR COLLEGE ROAD APT. 43 PALATKA FL 32177 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |
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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|--|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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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: **SIGNATURE REQUIRED** Date: **7/16/01** Daytime Phone #: **(386) 3288971**

CR2E094 (5/01)

Attachment
OFF PM 00038788
A0078923

Lucky Way Food Stores, Inc.
2101 Husson Ave.
Palatka, FL 32177-6510

Florida Department of State
Katherine Harris
Secretary of State

Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

To Whom It May Concern:

I, the owner of Lucky Way Food Stores did not receive a 2001 Uniform Business Report. Therefore, I did not send it back with the money. Please wave the penalty that has been sent to me. Thank you for your cooperation.

Thank you,

Lucky Way Foods