

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000053850

1. Entity Name  
NORTHEAST FOOD, INCORPORATED

FILED  
Apr 16, 2001 8:00 am  
Secretary of State

04-16-2001 90280 017 \*\*\*150.00

Principal Place of Business  
1301 4TH AVE.  
FT. LAUDERDALE FL 33304

Mailing Address  
1301 4TH AVE.  
FT. LAUDERDALE FL 33304

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 65-0936324

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

UDDIN, MOHAMMED N  
5670 W. ATLANTIC AVE., #101  
DELRAY BEACH FL 33484

7. Name and Address of New Registered Agent

Name HEMA KHANAM  
Street Address (P.O. Box Number is Not Acceptable)  
5670 W ATLANTIC AVE #101  
City DELRAY BEACH FL Zip Code 33484

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 Hema Khanam HEMA KHANAM SD. 04-05-01  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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, 2001 Fee will be \$550.00  
Make Check Payable to Department of State

10. Election Campaign Financing ☒ \$5.00 May Be  
Trust Fund Contribution. Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PD  
NAME SOHID, MOHAMMED ☐ Delete  
STREET ADDRESS 2801 FORSYTH AVE.  
CITY-ST-ZIP BOCA RATON FL 33487

TITLE VPD  
NAME KHAN, RANA ☐ Delete  
STREET ADDRESS C/O FAMOUS DELI, 6570 W. ATLANTIC AVE.  
CITY-ST-ZIP DELRAY BEACH FL 33446

TITLE SD  
NAME UDDIN, MOHAMMED N ☒ Delete  
STREET ADDRESS 5670 W. ATLANTIC AVE., #101  
CITY-ST-ZIP DELRAY BEACH FL 33484

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 Hema Khanam ☐ Change ☒ Addition  
NAME 5670 W. Atlantic Ave #101  
STREET ADDRESS Delray Beach FL 33484.  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
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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: Rana Khanam  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04.05.01

Date

Daytime Phone #

CR2E034 (10/00)