

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

1. Entity Name

P 99000066384

**FILED**  
**Jun 08, 2000 8:00 am**  
**Secretary of State**

06-08-2000 90431 041 \*\*\*150.00

Principal Place of Business

Mailing Address

3303 KENILWORTH BLVD.  
FOUR MILE

2. Principal Place of Business

3. Mailing Address

SEBRING FL 34744

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

4. FEI Number

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SHAMIM M. ALI  
817-18TH ST. SW  
LARGO FL-33770

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

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, 2000 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. PRES. OFFICERS AND DIRECTORS

TITLE NAME SHAMIM M. ALI ☐ Delete  
STREET ADDRESS 817-18TH ST SW  
CITY-ST-ZIP LARGO FL-33770

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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

TITLE NAME ☐ Change ☐ Addition  
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)

5/16/00

CORPORATE DETAIL RECORD SCREEN

NUM: P99000066384 ST:FL ACTIVE/FL PROFIT FLD: 07/27/1999

NAME : 3303 KENILWORTH BLVD, FOOD MART, INC.

PRINCIPAL: 3303 KENILWORTH BLVD.

ADDRESS SEBRING, FL 33870

RA NAME : ALI, SHAMIM M

RA ADDR : 790 EAST BAY DRIVE

LARGO, FL 33770 US

ANN REP : \* NONE FILED \*

Attachment  
DH P99000066384  
9:37 AM

0062611

5/16/00

OFFICER/DIRECTOR DETAIL SCREEN

9:38 AM

CORP NUMBER: P99000066384 CORP NAME: 3303 KENILWORTH BLVD FOOD MART, INC.

TITLE: P NAME: ALI, SHAMIM M

790 EAST BAY DRIVE

LARGO, FL 33770

TITLE: D NAME: ALI, SHAMIM A

790 EAST BAY DRIVE

LARGO, FL 33770