

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2004 8:00 am
Secretary of State

04-23-2004 90207 025 ***158.75

DOCUMENT # P99000089203

1. Entity Name
UNITED FOOD MART, INC.



Principal Place of Business
3101 N SR 7
LAUDERDALE LAKES, FL 33313

Mailing Address
3101 N SR 7
LAUDERDALE LAKES, FL 33313

2. Principal Place of Business

3101 N SR 7

Suite, Apt. #, etc.

3. Mailing Address

4701 NW 10th St

Suite, Apt. #, etc.



04152004

Chg-P

CR2E034 (10/03)

City & State

Lauderdale Lakes

Zip

33313

Country

Broward

City & State

Plantation, FL

Zip

33313

Country

Broward

4. FEI Number

65-0955820

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RAHMAN, MOHAMMED M
927 NW 130TH TERR
SUNRISE, FL 33325

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE MOHAMMED M RAHMAN, PRESIDENT
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/19/04

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME RAHMAN, MOHAMMED M
STREET ADDRESS 927 NW 130TH TERR
CITY-ST-ZIP SUNRISE, FL 33325

TITLE D ☒ Delete
NAME DELWAR, MOHAMMED S
STREET ADDRESS 2445 SW 18TH TERR #103
CITY-ST-ZIP FT LAUDERDALE, FL 33315

TITLE D ☒ Delete
NAME ULLAH, KHANDOKER M
STREET ADDRESS 711 SE 15TH ST #5
CITY-ST-ZIP FT LAUDERDALE, FL 33316

TITLE D ☒ Delete
NAME KHAN, SAHID
STREET ADDRESS 900 A CONSTITUTION DR
CITY-ST-ZIP HOMESTEAD, FL 33034

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: M. Rahman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/04 (954) 461-7807
Date Daytime Phone #