2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 26, 2000 8:00 am
Secretary of State
05-02-2000 90009 049 ***150.00

DO NOT WRITE IN THIS SPACE

DOCUMENT # P99000096580

1. Entity Name
AB ORIENTAL MARKET, INC.

Principal Place of Business	Mailing Address
1749 N MILITARY TRAIL #B WEST PALM BEACH FL 33409	1749 N MILITARY TRAIL #B WEST PALM BEACH FL 33409-4769

2. Principal Place of Business		3. Mailing Address	
1749 N Military Trail		same above	
Suite, Apt. #, etc. #B		Suite, Apt. #, etc. 1749 N. Military Trail	
City & State West palm Beach		City & State #B West palm Beach fl	
FL 33409			
Zip	Country	Zip 33409	Country USA

4. FEI Number 267837551 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** *Additional* Fee Required

6. Name and Address of Current Registered Agent

NGUYEN, DONG V
1749 N MILITARY TRAIL #B
WEST PALM BEACH FL 33409

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 DONG NGUYEN OWNER 20-MAR-2000
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. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DONG VAN NGUYEN ☐ Delete OWNER - 4557 MYLA LANE West palm Beach fL 33415	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete Same above	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete Same	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete Same	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (9/99)

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: Dong Nguyen March 20/00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Dong V Nguyen May 16/2000 11:00 AM

Tel 561-686-3655