

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000105902

1. Entity Name

MISSOURI MOON FOOD MART INC

FILED
Sep 06, 2001 8:00 am
Secretary of State

09-06-2001 90269 016 ***150.00

A0083885

DO NOT WRITE IN THIS SPACE

Principal Place of Business
1301 S MISSOURI AVE
CLEARWATER, FL 33756

Mailing Address
1301 S MISSOURI AVE
CLEARWATER, FL 33756

2. Principal Place of Business

3. Mailing Address

3524 KINGBURY DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

HOLIDAY, FL

4. FEI Number

59-3609202

Applied For

Not Applicable

Zip

Country

Zip

34691

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MOLLAH, MOHAMMAD A
3524 KINGBURY DR
HOLIDAY, FL 34691

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

Mohammad A. Mollah
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

8/30/01

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
Just Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **MOLLAH, MOHAMMAD A**
STREET ADDRESS **3524 KINGBURY DR**
CITY-ST-ZIP **HOLIDAY, FL 34691**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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

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:

Mohammad A. Mollah
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

8/30/01

CR2E034 (11/00)

Attachment
A0083085

MISSOURI MOON FOOD MART INC
3524 KINGSBURY DR
HOLIDAY, FL 34691

DIVISION OF CORPORATIONS
UNIFORM BUSINESS REPORT FILINGS
P O BOX 1500
TALLAHASSEE, FL 32302-1500

DOCUMENT # 99000105902
FEI # 59-3609202

We have not received your first UBR 2001 so far. We changed our mailing address in the beginning of the year. Probably your mail must have lost in transit or misplaced some where. We could not contact you, as we do not aware of the procedure.

Please excuse for this time, as we did not do it willfully. This is happened due to ignorance.

We are enclosing a check of \$150.00 towards the annual fee. Please accept this.

Thanking you, for your co-operation.

Mohammad A. Mollah
Mohammad A Mollah.

President

August 30, 2001