

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# S46061

FILED  
Sep 18, 2006  
Secretary of State

Entity Name: THRIFTWAY OF PAHOKEE, INC.

## Current Principal Place of Business:

181 RARDIN AVENUE  
PAHOKEE, FL 33476

## New Principal Place of Business:

## Current Mailing Address:

181 RARDIN AVENUE  
PAHOKEE, FL 33476

## New Mailing Address:

FEI Number: 65-0255739

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KAHOK, AHMAD  
1537 BACOM POINT RD  
PAHOKEE, FL 33476 US

## Name and Address of New Registered Agent:

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: AHMAD KAHOK

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete  
Name: KAHOK, AHMAD,  
Address: 1537 BACOM POINT ROAD  
City-St-Zip: PAHOKEE, FL

Title: DVT ( ) Delete  
Name: KAHOL, NAJWA  
Address: 1537 BACOM POINT ROAD  
City-St-Zip: PAHOKEE, FL 33476

Title: S ( ) Delete  
Name: CONLEY, ADA B  
Address: 16502 SW MORGAN RD  
City-St-Zip: INDIANTOWN, FL 34956

Title: D ( ) Delete  
Name: KAHOOK, WASEEM  
Address: 31 LAKESIDE CIRCLE  
City-St-Zip: PAHOKEE, FL 33476

Title: AT ( ) Delete  
Name: KAHOK, JAMIL  
Address: 2260 BACOM POINT RD  
City-St-Zip: PAHOKEE, FL 33476

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AHMAD KAHOK

P

09/18/2006

Electronic Signature of Signing Officer or Director

Date