

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P93000027165 (8)**

1. Corporation Name
SUPER STOP OF TEXAS, INC.



Principal Place of Business: **1500 W. CYPRESS CREEK RD. STE. 306 FT LAUDERDALE FL 33309 US**
Mailing Address: **1500 W. CYPRESS CREEK RD. STE. 306 FT LAUDERDALE FL 33309 US**

3. Date Incorporated or Qualified: **04/12/1993**
3a. Date of Last Report: **05/11/1995**
4. FEI Number: **65-0471918**
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes

2. Principal Place of Business: [21] State, Apt. #, etc.: [22] City & State: [23] Zip: [24] Country: [25]
2a. Mailing Address: [26] State, Apt. #, etc.: [27] City & State: [28] Zip: [29] Country: [30]

9. Name and Address of Current Registered Agent

**MARKATIA, MOHAMMED A
1901 W CYPRESS CREEK RD #400-4
FT LAUDERDALE FL 33309**

10. Name and Address of New Registered Agent

81 Name: [82] Street Address (P.O. Box Number is Not Acceptable): [83] [84] City: [85] Zip Code: **FL**

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ DATE: _____

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '12

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '12	
TITLE	NAME, STREET ADDRESS, CITY, ST, ZIP	TITLE	NAME, STREET ADDRESS, CITY, ST, ZIP
	<input type="checkbox"/> DELETE PD MARKATIA, MOHAMMED A 202 LAKE POINTE DR. #108 FT LAUDERDALE FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition 1. TITLE 2. NAME 3. STREET ADDRESS 4. CITY - ST - ZIP	
	<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition 5. TITLE 6. NAME 7. STREET ADDRESS 8. CITY - ST - ZIP	
	<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition 9. TITLE 10. NAME 11. STREET ADDRESS 12. CITY - ST - ZIP	
	<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition 13. TITLE 14. NAME 15. STREET ADDRESS 16. CITY - ST - ZIP	
	<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition 17. TITLE 18. NAME 19. STREET ADDRESS 20. CITY - ST - ZIP	
	<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition 21. TITLE 22. NAME 23. STREET ADDRESS 24. CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information included on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Mohammed A Markatia* **MOHAMMED A MARKATIA** 2/15/96 954.928.0917
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Time Phone #

CR2E034 (12/95)