

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1998**



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

DOCUMENT # **P96000054304 (6)**

1. Corporation Name

**HOQUE'S TEXACO II, INC.**

Principal Place of Business

**14111 MILITARY TRAIL  
DELRAY BEACH FL 33445**

Mailing Address

**14111 MILITARY TRAIL  
DELRAY BEACH FL 33445**

FILED  
Aug 05 1998 8:00am  
Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**06/24/1996**

4. FEI Number

**65-0681919**

Applied For

Not Applicable

2. Principal Place of Business

**21**  
Suite, Apt. #, etc.

2a. Mailing Address

**26**  
Suite, Apt. #, etc.

**22**  
City & State

**27**  
City & State

**23**  
Zip Country

**28**  
Zip Country

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**HOGUE, ANM E  
14111 MILITARY TRAIL  
DELRAY BEACH FL 33445**

10. Name and Address of New Registered Agent

**81** Name

**82** Street Address (P.O. Box Number is Not Acceptable)

**83**

**84** City

**FL**

**85** Zip Code

11. Pursuant to the provisions of sections 607.0502 and 607.1508, 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE  
NAME **HOQUE, ANM E**  
STREET ADDRESS **503 SE 20TH AVE, APT 1B**  
CITY-ST-ZIP **BOYNTON BEACH FL 33435**

TITLE **D** ☒ DELETE  
NAME **HOQUE, ANM A**  
STREET ADDRESS **503 SE 20TH AVE, APT 1B**  
CITY-ST-ZIP **BOYNTON BEACH FL 33435**

TITLE **D** ☐ DELETE  
NAME **NAHO, FATIMA**  
STREET ADDRESS **12693 TORBAY DR**  
CITY-ST-ZIP **BOCA RATON FL 33428**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 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:

*[Signature]*

7/20/98 495-0289

CR2E034 (5/98)

(2)

JULY 27, 1998

DIVISIONS OF CORPORATIONS  
ANNUAL REPORTS FILINGS  
P.O. BOX 1500  
TALLAHASSEE, FL 32302

RE: HOQUES TEAXACO II, INC.  
DOC # P96000054304

TO WHOM IT MAY CONCERN:

THIS LETTER IS TO FOLLOW UP MY CONVERSATION WITH YOUR  
DEPARTMENT CONCERNING THE FILING OF THE ANNUAL REPORT.

I NEVER RECEIVED THE FIRST COPY OF THE ANNUAL REPORT. THE  
SECOND REMINDER IS THE FIRST TIME I HAVE SEEN THIS FORM THIS  
YEAR. PURSUANT TO OUR CONVERSATION I AM ENCLOSING THE  
ORIGINAL \$150.00 FEE ALONG WITH THE ANNUAL REPORT.

THANK YOU FOR YOUR UNDERSTANDING,

ANM HOQUE