

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jul 27 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P970000029577 1. Corporation Name Super Discount City, Inc					
Principal Place of Business P.O. BOX 52762 Jacksonville, FL. 32201			Mailing Address P.O. BOX 52762 Jacksonville, FL. 32201		
2. Principal Place of Business 21 Suite Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Rd. S. Jax, FL. 32217 27 Suite, Apt. #, etc. 28 City & State 29 Zip 30 Country		3. Date Incorporated or Qualified 4/1/97 4. FEI Number 59-3441327 Applied For Not Applicable	
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 Is-hak Saddique 580 W. 8th ST. Suite # 8005 Jacksonville, FL. 32209.			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 Is-hak Saddique DATE 7/17/98					
12. OFFICERS AND DIRECTORS TITLE ☐ DELETE NAME STREET ADDRESS CITY-ST-ZIP TITLE ☐ DELETE NAME STREET ADDRESS CITY-ST-ZIP 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 11 TITLE ☐ Change ☐ Addition 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 21 TITLE ☐ Change ☐ Addition 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 31 TITLE ☐ Change ☐ Addition 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP 41 TITLE ☐ Change ☐ Addition 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP 51 TITLE ☐ Change ☐ Addition 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP 61 TITLE ☐ Change ☐ Addition 62 NAME 63 STREET ADDRESS 64 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.			300002602913 -07/30/98--01071--006 ***150.00		
SIGNATURE: Ayman Mofati			4/30/98		

CR2E034 (10/97)

To: Secretary of State
Division of Incorporations,
Tallahassee, Fl.

Super Discount City,
Box 52762
Jacksonville, Fl.
32201

PJ2

TO WHOM IT MAY CONCERN:

Please be advised by the change of
address for Registered agent. The original
form was never received.

Thanks.

Isiah Sedtze.