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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

SHEIKH DONUT CORPORATION

DOCUMENT # J68508

(7)

FILED

Apr 11 1997 8:00am

Secretary of State

Principal Place of Business 11790 N KENDALL DR MIAMI FL 33186 US		Mailing Address			T ISTERIA SLIP SINGLANDI SINI SOLOLIALE BISIL SISTI OLDIN SLOUE DISILI CODI		
		13422 S.W. 128TH STREET MIAMI FL 33186-5800					
US					3. Date Incorporated or Qualified 04/16/1987	3a. Date of Las 02/16/1990	
2. Principal i	Prace of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26	26		59-28 18886		Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.79	5 Additionat	
22		27			S. Certificate of States Desired	Fee	Required
City & Sta	ite	City & State			6. Election Campaign Financing	\$5.0	May Be
23		28			Trust Fund Contribution		d to Fees
Zip	Country	Ζφ	Count	ry	B. This corporation has liability for		rs. 199.032,
24	25	29	30			Yes No	
	9. Name and Address of Currs	nt Registered Agent			10. Name and Address of New Re	gistered Agent	
MI	LLER, JACK C.		Į8	1 Name			
13422 SW 128TH ST.				2 Street Add	reet Address (P.O. Box Number is Not Acceptable)		
MIZ	AMI FL 33186		-				
		•	8	3			
			-	A City		00 7	in Code
			.	4 City		FL 65 Z	p Code
11. Pursuan	to the provisions of Sections 607.05	02 and 607.1508, Florida State	utes, the abo	ve-named co	rporation submits this statement for the p		its registered
office or	registered agent, or both, in the Stat	e of Florida. Such change was	authorized	by the corpora	rporation submits this statement for the pation's board of directors. I hereby accept	ot the appointment	as registered
agent. F	am tamiliar with, and accept the obliq	gations of, Section 607.0505, F	riorida Statut	es.			
SIGNATURE	Signature typical or printed name of registered ap	sent and title if applicable (NC	TF: Boostered &	nont signature ren	ulted when reinstating)	DATE	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE		ORS IN 12
TITE	D	DELETE	1.1 TURLE			Chang	
NAME	NASEER, MUHAMMAD		1.2 NAM	r			_
STREET ADDRESS	40 00 1410 00 0Y		1	ET ADDRESS	•		
	MIAMI FL				*		
CITY-ST-ZIP TITLE	D	DELETE	2.1 TITLE	- ST- ZIP		Chano	e Addition
NAME	NASEER, NIGHAT		2.2 NAM				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	AATAA AIA UPAINALI OD		ı		· , •		
STREET ADDRESS	MIAMI FL		1	ET ADDRESS			
CITY-SY-ZIP	WINNI LE	DELETE		-ST-ZIP		☐ Chang	e Addition
JULE		f"") DECELL	3.1 TITLE			L. Grang	e LT VODIGGI
NAME			3.2 NAM				
STREET ADDRESS				ET ADDRESS			
CITY - S1 - ZIP	ļ	Decer		- ST-ZIP			
TITLE		L DELETE	4.1 TITLE			Chang	e 🔲 Addition
NAME			4 2 NAN				ļ
STREET ADDRESS			4.3 STRE	ET ADDRESS			
CITY-ST-7/P			4.4 CITY	-ST-ZIP			
TITLE		☐ DELETE	5.1 T(TLE			Chang	e 🔲 Addition
NAME			5.2 NAM	E			
STREET ADDRESS			5.3 STRE	ET ADDRESS			
CITY+ST-ZIP			5.4 CITY	-ST-ZIP	- N. 		
TITLE		DELETE	6.1 Tritle			Chang	e 🔲 Addition
NAME			6.2 NAM	E			
STREET ADDRESS			6.3 STRE	ET ADORESS			
CITY-ST-ZIP		•	64 CITY	ì			
14 1 do boss	aby could, that the information cumply	ad with this files does not our			ad in Saction 110 07/3/() Florida Statuto	a Liferathan agelificati	ot the

I do 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 eath; 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 13 if changeo, or on an attachment with an address.

SIGNATURE:

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