FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P020000 10102.



## **FILED** Apr 10, 2003 8:00 am Secretary of State

04-10-2003 90114 005 \*\*\*158.75

KWIK Stop # 22538 ine 1	
DO NOT WRITE IN THIS SP  2. Principal Place of Business  (Output 1 and 3 Mailing Address	70036596 PACE
4103 So Orlando Dr Suite, Apt. #, etc. Suite, Apt. #, etc.	DO NOT WRITE IN THIS SPACE
City & State Ford City & State San	15 - 2999 130   Not Applicable
Zip 32773 Country Seminole Zip	5. Certificate of Status Desired \$8.75 Additional Fee Required  7. Name and Address of Current Registered Agent
DO_NOT_WRITE	Name Mahmoud H. Musqlam  Street Address (P.O. Box Number is Not Acceptable).
IN THIS SPACE	City Lake Worth FL Zip Code (1
The above named entity submits this statement for the purpose of changing its rethe obligations of registered agent.	egistered office or registered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: F	Registered Agent signature required when reinstating)  Apr.'L 6 503  DATE
January 1 - May 1 Fee is \$150.00 After May 1 Fee is \$550.00 Amended UBIA:s \$61.25 Make Check Payable to Florida Qepartment of State	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees
10. OFFICERS AND DIRECTORS	The transfer of the second and the s
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP

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 report or supplemental 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

4/7/63	
To UBR Dept.	
P.s My Afformy George Wallace Mailed you a check	
back in Nov 2002	
please Refund it to my address  m. musallam  70 44- Peninsula U	
Lake worth Fl 33467	
because I am paying for all the fees	
owner of kwikstop	
p.5 my afformy Form was in Complete	
Biz addrass	