2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 15, 2003 8:00 am
Secretary of State

04-15-2003 90092 010 ***150.00

DOCUMENT # P02000079337

1. Entity Name
66TH STREET PLAZA, INC.

Principal Place of Business	Mailing Address
447 3 AVE N #405 ST PETERSBURG FL 33701	447 3 AVE N #405 ST PETERSBURG FL 33701

2. Principal Place of Business	3. Mailing Address
PO BOX 22111	PO BOX 22111
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: ST PETERSBURG, FL.	City & State: ST PETERSBURG, FL
Zip: 33742 Country: PINELLAS	Zip: 33742 Country: PINELLAS

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 16-1615761 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

FIELDS ANDERSON, PATRICIA
447 3 AVE N #405
ST PETERSBURG FL 33701

7. Name and Address of New Registered Agent

Name: JAMAL QANDIL
Street Address (P.O. Box Number is Not Acceptable): 775 N. VILLAGE DRIVE #101B
City: St. PETERSBURG FL Zip Code: 33716

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Jamal Qandil DATE: 4/11/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D	☐ Delete
NAME	QANDIL, JAMAL	
STREET ADDRESS	P.O. BOX 22111	
CITY-ST-ZIP	ST PETERSBURG FL 33742	
TITLE	D	☐ Delete
NAME	ABUAYYASH, ISHAQ	
STREET ADDRESS	P.O. BOX 22111	
CITY-ST-ZIP	ST PETERSBURG FL 33742	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
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CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

CR2E034 (10/02)

12. 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED Jamal Qandil 4/11/03 727-251-5994
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #