

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 25, 2004 8:00 am
Secretary of State

04-30-2004 90285 030 ***150.00

DOCUMENT # P03000050533 1. Entity Name MUSTSHOP ENTERPRISES, INC.																																															
Principal Place of Business 18943 S.W. 92 AVE. MIAMI FL 33157			Mailing Address 18943 S.W. 92 AVE. MIAMI FL 33157																																												
2. Principal Place of Business P.O. Box		3. Mailing Address P.O. Box																																													
Suite, Apt. #, etc. 0801		Suite, Apt. #, etc. 0801																																													
City & State Miami FL		City & State Miami FL		4. FEI Number 450514342																																											
Zip 33257		Country USA		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required																																											
6. Name and Address of Current Registered Agent KRAMER, ELSA 18943 S.W. 92 AVE. MIAMI FL 33157				7. Name and Address of New Registered Agent Name AHMED J Renta Street Address (P.O. Box Number is Not Acceptable) 17891 S. Dixie Hwy Suite G City Miami FL Zip Code 33157																																											
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 <u><i>Ahmed J Renta</i></u> 4-28-04 DATE 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, 2004 Fee will be \$350.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																																												
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td style="width: 33%;">TITLE NAME STREET ADDRESS CITY- ST- ZIP</td> <td style="width: 33%;"> DP KRAMER, ELSA 18943 S.W. 92 AVE. MIAMI FL 33157 </td> <td style="width: 33%; text-align: right;">☒ Delete</td> <td style="width: 33%;">TITLE NAME STREET ADDRESS CITY- ST- ZIP</td> <td style="width: 33%;"></td> <td style="width: 33%; text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td style="width: 33%;">TITLE NAME STREET ADDRESS CITY- ST- ZIP</td> <td style="width: 33%;"> President AHMED J. Renta 17891 S. Dixie Hwy Suite G Miami FL 33157 </td> <td style="width: 33%; text-align: right;">☐ Delete</td> <td style="width: 33%;">TITLE NAME STREET ADDRESS CITY- ST- ZIP</td> <td style="width: 33%;"></td> <td style="width: 33%; text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td style="width: 33%;">TITLE NAME STREET ADDRESS CITY- ST- ZIP</td> <td style="width: 33%;"></td> <td style="width: 33%; text-align: right;">☐ Delete</td> <td style="width: 33%;">TITLE NAME STREET ADDRESS CITY- ST- ZIP</td> <td style="width: 33%;"></td> <td style="width: 33%; text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td style="width: 33%;">TITLE NAME STREET ADDRESS CITY- ST- ZIP</td> <td style="width: 33%;"></td> <td style="width: 33%; text-align: right;">☐ Delete</td> <td style="width: 33%;">TITLE NAME STREET ADDRESS CITY- ST- ZIP</td> <td style="width: 33%;"></td> <td style="width: 33%; text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td style="width: 33%;">TITLE NAME STREET ADDRESS CITY- ST- ZIP</td> <td style="width: 33%;"></td> <td style="width: 33%; text-align: right;">☐ Delete</td> <td style="width: 33%;">TITLE NAME STREET ADDRESS CITY- ST- ZIP</td> <td style="width: 33%;"></td> <td style="width: 33%; text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td style="width: 33%;">TITLE NAME STREET ADDRESS CITY- ST- ZIP</td> <td style="width: 33%;"></td> <td style="width: 33%; text-align: right;">☐ Delete</td> <td style="width: 33%;">TITLE NAME STREET ADDRESS CITY- ST- ZIP</td> <td style="width: 33%;"></td> <td style="width: 33%; text-align: right;">☐ Change ☐ Addition</td> </tr> </table>						10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			TITLE NAME STREET ADDRESS CITY- ST- ZIP	DP KRAMER, ELSA 18943 S.W. 92 AVE. MIAMI FL 33157	☒ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP		☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY- ST- ZIP	President AHMED J. Renta 17891 S. Dixie Hwy Suite G Miami FL 33157	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP		☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY- ST- ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP		☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY- ST- ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP		☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY- ST- ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP		☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY- ST- ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP		☐ Change ☐ Addition
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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: <u><i>Ahmed J Renta</i></u> 4-28-04 305/303-3255 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #																																															

66424008



MOORE CR2E034 (11/03)