2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Jul 27, 2005 8:00 am Secretary of State DOCUMENT # P04000145928 1. Entity Name 07-27-2005 90048 007 ***150.00 NAHAR-NUSRAT, INC. Principal Place of Business Mailing Address 2893 S DELANEY AVE 2893 S DELANEY AVE ORLANDO FL 32806 ORLANDO FL 32806 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) City & State City & State 4. FEI Number Applied For 20-1800192 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Hegistered Agent 7. Name and Address of New Registered Agent Name MASHBURN, ERIC A ESQ Street Address (P.O. Box Number is Not Acceptable) 102 E MAPLE ST WINTER GARDEN FL 34787 City Zip Code 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 Signature, typed or punted name of registered agent and title it applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. THEF ☐ Delete TITLE Change ☐ Addition MOHSIN, ASHRAFUNNAHAR NAME NAME STREET ADDRESS 2893 S DELANEY AVE STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32806 CITY-ST-7IP THEF ☐ Defete TITLE ☐ Change ☐ Addition NAME SULTAN, MOHAMMED NAME STREET ADDRESS 2893 S DELANEY AVE STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32806 CITY-ST-7IP HILE - Delete -RILE Change ☐ Addition NUSRAT MUNIR MUNIR, NUSRAT NAME STREET ADDRESS 2501 TRATMAN AVE - #A20 STREET ADDRESS 8515 REVEILLE RD CITY ST-ZIP **BRONX NY 10461** CITY-ST-ZIP ORLANDO, FL TITLE TITLE ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZiP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE □ Delete THEF ☐ Change ☐ Addition NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

ASHRAFUNNAHAR

ASH RAFUNN SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED

ATTACHMENT

Nahar- Nusrat Inc DBA

Shop Kwik

2893 S Delaney Ave Orlando, FL 32806

Division of Corporations
Annual Report Section
P.O. Box 6850
Tallahassee, Fl 32314

Dear Sir/Madam:

We did not receive the Annual Report Form until July 17, 2005 even though we had mailed in the card to receive the form by mail. Hence we were unable to file it before May 1, 2005. I hope you will waive the late fee and accept the report.

Sincerely,

Ashrafunnahar Mohsin