

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Sep 18, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # P05000073212**

1. Entity Name  
ALIBABA' S 54TH ST FLEA MARKET, INC.



Principal Place of Business

1220 NW 54TH ST  
MIAMI, FL 33127

Mailing Address

1220 NW 54TH ST  
MIAMI, FL 33127

**DO NOT WRITE IN THIS SPACE**



09122008 No Chg-P CR2E034 (11/05)

4. FEI Number  
20-2864661

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

SEBAI, ALI  
1820 SW 62TH AVENUE  
MIAMI, FL 33155

**DO NOT WRITE  
IN THIS SPACE**

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 printed name of registered agent and fee if applicable.

(NOTE: Registered Agent's signature required when registering)

DATE

**FILE NOW!!! FEE IS \$150.00  
Due by September 12, 2008**

9. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the  
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE P  
NAME SEBAI, ALI  
STREET ADDRESS 1820 SW 62TH AVENUE  
CITY-ST-ZIP MIAMI, FL 33155

TITLE VP  
NAME SEBAI, LINA  
STREET ADDRESS 1820 SW 62ND AVENUE  
CITY-ST-ZIP MIAMI, FL 33155

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

U00000953908  
09/18/08-80005-022 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

09/13/08

Date

305-401-9628

Daytime Phone #