PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P93000026999

1. Corporation Name

SUPER STOP #201, INC.

Prin	cipa	al Place o	f Business
3101	N.	FEDERAL	HWY

SUITE 504 FT. LAUDERDALE FL 33306 Mailing Address

3101 N. FEDERAL HWY SUITE 504

FT. LAUDERDALE FL 33306

Mar 19, 1999 8:00 am Secretary of State 03-19-1999 90011 039 ***150.00

03-19-1999 90011 040 *****8.75



DO NOT WRITE	IN	THIS	SPACE	

US		US				3. Date Incorpo	orated or Qualifed		ι	
						04/08/199	93			
2. Principal Pl	ace of Business	2a. Mailing Address		. —		4. FEI Number			Ap	plied For
27 6221	w. At lantic Bu	26 6221 W. At	(ar	tic B	lvd.	65-04103	00	_	No	t Applicable
Suite, Apt.		Suite, Apt. #, etc.				1	Status Desired	☆	\$8.75 . Fee Re	Additional equired
City & State	9 _	City & State				6. Election Car	npaign Financing		\$5.00	May Be
23 Marcy	ale +L	28 Margale,	Coun	<u>L</u>		Trust Fund (Contribution		Added	
Zip (24 330 2	Country 25	29 33063 30	٦	y	_	Personal Pr		_	X es	□No
	9. Name and Address of Current	Registered Agent	+			10. Name and	Address of New	Registered	Agent	
0.10	FOLU DENIGE			81 Name						
	ESHI, DENISE		ı	82 Ştreet	Addre	ss (P.O. Box Num	ber is Not Accept	able)	1. N	
	N. FEDERAL HWY			100	<u> </u>	<u> </u>	ttlev4;	σ σ	Ivd.	
	E 504		1	83						\
FI. L	AUDERDALE FL 33306		}	84 City	Λ				85 Zip	Code
				\perp	\ar	aute		FI		3 <u>3</u>
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida Such change was auth	onzea	DV the cort	corpor oration	ration submits this n's board of direct	statement for the ors. I hereby acce	purpose o	of changing its pintment as re	registered gistered
	with and accept the congain	Λ . \sim	()	المام	Q.	e de un		「~フ	6-89	į
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	gistered	Agent signature	required	when reinstating)		DATE		
12.	OFFICERS AND		13.			ADDITIONS/	CHANGES TO OF	FICERS A		
TITLE	DPST	DELETE	1.1 ∏∏	l.E					Change	☐ Addition
NAME	Qureshi, Denise		1.2 NA	ME	١, .		011			
STREET ADDRESS	2880 NE 29TH ST.		1.3 STF	REET ADDRESS	6	221 W.	Atlant:	'C (Q	Wd.	
CITY-ST-ZIP	FT LAUDERDALE FL 33306		1.4 CIT	Y-ST-ZIP	W	orgate.	FL 3	300	3	
TITLE		☐ DELETE	2.1 TIT	LE		7	1		☐ Change	☐ Addition
NAME			2.2 NA	ME						
STREET ADDRESS			2.3 ST	REET ADDRESS						
CITY-ST-ZIP			2. 4 CIT	IY-ST-ZIP						
TITLE		DELETE	3.1 TiT	TE.			=		☐ Change	☐ Addition
NAME			3.2 NA	ME					a a	
STREET ADDRESS			3.3 STI	REET ADDRESS						
CITY-ST-ZIP			3.4. CIT	ry-st-zip						
TITLE		☐ DELETE	4.1 1111	LE					☐ Change	Addition
NAME			4.2 NA	ME	1					
STREET ADDRESS			4.3 STI	REET ADDRESS						
CITY-ST-ZIP			4.4 CIT	Y-ST-ZIP						
TITLE		☐ DELETE	5.1 TIT	LE					☐ Change	☐ Addition
NAME			5.2 NA	ME					•	1
STREET ADDRESS			5.3 \$ ∏	REET ADDRESS						į
CITY-ST-ZIP			5.4 CIT	Y-ST-ZIP						
TITLE		☐ DELETE	6.1 TIT	LÉ	1	*	=	_	☐ Change	☐ Addition
NAME			6.2 NA	ME						
STREET ADDRESS		•	6.3 STI	REET ADDRESS	d					
		•	6.4 CIT	Y-ST-ZIP					•	
CITY-ST-ZIP	l									

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: