FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000027166

1. Corporation Name

SUPER STOP #301, INC.

		_	
Principal	Place	of	Business

3101 N. FEDERAL HWY

SUITE 504

FT LAUDERDALE FL 33306

Mailing Address

3101 N. FEDERAL HWY

SUITE 504

FT LAUDERDALE FL 33306

FILED Mar 19, 1999 8:00 am Secretary of State

03-19-1999 90011 043 *****8.75 03-19-1999 90011 044 ***150.00



DO NOT WRITE IN THIS SPACE

US	- 12 0000	US		3. Date Incorporated or Qualifed		
				04/08/1993		
2. Principal Pl	ace of Business	2a, Mailing Address		4. FEI Number	Applie	
21 (0221	W. Atlantic Blud.	26 6221 W. H	antic Bli	선, 65-0425238		plicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Addi Fee Requir	1
City & State		City & State	CI	6. Election Campaign Financing	\$5.00 Ma Added to Fe	, ,
23 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	<u> </u>	28/1 rorgale	P C	Trust Fund Contribution		ees
Zip 24 3 306	7 Country 25	29 33063 30	Country	This corporation owes the current year li Personal Property Tax.	∑XYes □	No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered	d Agent	
551	OF OURSOLD		81 Name			
	ISE QURESHI		82 Street Ad	ddress (P.O. Box Number is Not Acceptable)	<u> </u>	
3101 N. FEDERAL HWY				<u>k</u>		
SUITE 504			-			
FTL	AUDERDALE FL 33306		84 Qfty A		85 Zip Cod	
			°° 4° 10° 10° 10° 10° 10° 10° 10° 10° 10° 10	irqute, F	L 85 Zip Cod	63
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the above-named co	programme submits this statement for the nurrose of	of changing its reg	istered
office or re	egistered agent, or both, in the State on familiar with, and accept the obligation	i Fionda. Such change was auth	orized by the corpor	ation's board of directors. I hereby accept the app	ointment as regist	erea
		: Danie Our	eshi Pies)-26	-99	ļ
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	gistered Agent signature req	uired when reinstating) DATE		
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A		
TITLE	DPTS	☐ DELETE	1.1 TITLE		Change [Addition
NAME	Qureshi, Denise		1.2 NAME	21.	اما	
STREET ADDRESS	2880 NE 29TH STREET		1.3 STREET ADDRESS	121 W. HILLANTIC DI	0.	
CfTY-ST-ZIP	FT LAUDERDALE FL 33306		1.4 CITY-ST-ZIP	Margale, FL 33063		
TITLE		☐ DELETE	2.1 TITLE		Change [Addition
NAME			2.2 NAME			ļ
STREET ADDRESS			2.3 STREET ADDRESS			-
CITY-ST-ZIP			2.4 CITY-ST-ZIP			ì
TITLE		☐ DELETE	3.1 TITLE	A CONTRACTOR OF THE PARTY	Change	Addition
NAME		_	3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
			3.4. CITY-ST-ZIP			
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TITLE		☐ Change	Addition
]			4. 2 NAME		_ •	İ
NAME			4.3 STREET ADDRESS			j
STREET ADDRESS			4.4 CITY-ST-ZIP			1
CITY-ST-ZIP		DELETE	5.1 TITLE		Change	Addition
TITLE			5.2 NAME			_
NAME			5.3 STREET ADDRESS			
STREET ADDRESS						
CITY-ST-ZIP			5.4 CITY-ST-ZIP 6.1 TITLE		[] Change	Addition
TITLE		☐ OELETE			Change	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY OT 7ID			6.4 CITY-ST-ZIP			

14. 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 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: