

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**CORPORATION
ANNUAL REPORT
1995****FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS****DOCUMENT # P93000027186 (4)**

1. Corporation Name

SUPER STOP AMOCO #103, INC.**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS****95 APR 11 PM 9:41**

Principal Place of Business

**3127 NW 69TH COURT
FT LAUDERDALE FL 33309**

Mailing Address

**3127 NW 69TH COURT
FT LAUDERDALE FL 33309**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/08/1993

3a. Date of Last Report

05/31/1994

4. FEI Number

65-0402586

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**6. Election Campaign Financing
Trust Fund Contribution**\$5.00 May Be
Added to Fees**8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

Yes



No

2. Principal Place of Business

21 2880 NE 29th St.

2a. Mailing Address

26 2880 NE 29th St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Ft. Lauderdale FL

City & State

28 Ft. Lauderdale FL

Zip

24 33306

Country

25 USA

Zip

29 33306

Country

30 USA

9. Name and Address of Current Registered Agent

QURESHI, DENISE**3127 NW 69TH COURT
FT LAUDERDALE FL 33309**

10. Name and Address of New Registered Agent

81 Name

Denise Qureshi

82 Street Address (P.O. Box Number is Not Acceptable)

2880 NE 29th Street

83

84 City

Ft. Lauderdale**FL**

85 Zip Code

33306

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Denise Qureshi, Denise Qureshi, Pres.**4-6-95**

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DP
NAME	QURESHI, DENISE
STREET ADDRESS	3127 NW 69TH COURT
CITY - ST - ZIP	FT LAUDERDALE FL
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	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DP	☒ Change ☐ Addition
1.2 NAME	Denise Qureshi	
1.3 STREET ADDRESS	2880 NE 29th Street	
1.4 CITY - ST - ZIP	Ft. Lauderdale FL 33306	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

Denise Qureshi, Denise Qureshi, Pres. 4-6-95 305-537-

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 7776