

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morcharn
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 2:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000068507 (1)

1. Corporation Name

JUST-A-BUCK (CASSELBERRY), INC.

Principal Place of Business

3385 S HIGHWAY 17-92
CASSELBERRY FL 32707

Mailing Address

3385 S HIGHWAY 17-92
CASSELBERRY FL 32707

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/01/1993

3a. Date of Last Report

05/01/1994

4. FEI Number

65-0441024

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

6. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐

Yes

☐

No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

29 Zip

Country

9. Name and Address of Current Registered Agent

FILINGS, INC.
3732 NW 16TH ST
FT LAUDERDALE FL 33311

10. Name and Address of New Registered Agent

81 Name

ARIF RATNANI

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

3385 S HWY 17-92 Space 189

83

84 City

CASSELBERRY

FL

85 Zip Code

32707

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

ARIF RATNANI

(Type or Print Name of Registered Agent (Signature Required After Verification))

DATE

12. OFFICERS AND DIRECTORS

101 NAME
D RATNANI, ARIF
102 STREET ADDRESS
3385 S HWY 17-92 SPACE 189
103 CITY, ST, ZIP
CASSELBERRY FL 32707

104 NAME
D GULAMALI, AKBAR
105 STREET ADDRESS
3385 S HWY 17-92 SPACE 189
106 CITY, ST, ZIP
CASSELBERRY FL 32707

107 NAME
D JIWANI, MURAD
108 STREET ADDRESS
3385 S HWY 17-92 SPACE 189
109 CITY, ST, ZIP
CASSELBERRY FL 32707

110 NAME

111 STREET ADDRESS

112 CITY, ST, ZIP

113 NAME

114 STREET ADDRESS

115 CITY, ST, ZIP

116 NAME

117 STREET ADDRESS

118 CITY, ST, ZIP

119 NAME

120 STREET ADDRESS

121 CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 NAME ☐ Change ☐ Addition

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY, ST, ZIP

13.5 NAME ☐ Change ☐ Addition

13.6 NAME

13.7 STREET ADDRESS

13.8 CITY, ST, ZIP

13.9 NAME ☐ Change ☐ Addition

13.10 NAME

13.11 STREET ADDRESS

13.12 CITY, ST, ZIP

13.13 NAME ☐ Change ☐ Addition

13.14 NAME

13.15 STREET ADDRESS

13.16 CITY, ST, ZIP

13.17 NAME ☐ Change ☐ Addition

13.18 NAME

13.19 STREET ADDRESS

13.20 CITY, ST, ZIP

13.21 NAME ☐ Change ☐ Addition

13.22 NAME

13.23 STREET ADDRESS

13.24 CITY, ST, ZIP

13.25 NAME ☐ Change ☐ Addition

13.26 NAME

13.27 STREET ADDRESS

13.28 CITY, ST, ZIP

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.03(2)(b), 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 in person. I am an officer or director of the corporation or the receiver or liquidator empowered to execute this report as required by Chapter 492, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: x

ARIF RATNANI

ARIF

(Type or Print Name of Signing Officer or Director)