

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P93000068507 (1)**
1. Corporation Name

JUST-A-BUCK (CASSELBERRY), INC.



Principal Place of Business

Mailing Address

**3385 S HIGHWAY 17-92
CASSELBERRY FL 32707**

**3385 S HIGHWAY 17-92
CASSELBERRY FL 32707**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc

26 Suite, Apt #, etc

22 City & State

27 City & State

23 Zip Country

28 Zip Country

3. Date Incorporated or Qualified

10/01/1993

3a. Date of Last Report

05/01/1995

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**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**RATNANI, ARIF
3385 S. HWY 17-92, SPACE 189
CASSELBERRY FL 32707**

10. Name and Address of New Registered Agent

81 Name **MOHAMMED BELAYET HOSSAIN**

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

83 **3385 S. HWY 17-92 #189**

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

Mohammed Belayet Hossain

Signature (Typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☒ DELETE
NAME **RATNANI, ARIF**
STREET ADDRESS **3385 S HWY 17-92 SPACE 189**
CITY - ST - ZIP **CASSELBERRY FL 32707**

TITLE **D** ☒ DELETE
NAME **JIWANI, MURAD**
STREET ADDRESS **3385 S HWY 17-92 SPACE 189**
CITY - ST - ZIP **CASSELBERRY FL 32707**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE **DPST** ☐ Change ☐ Addition
12 NAME **MOHAMMED BELAYET HOSSAIN**
13 STREET ADDRESS **3385 S. HWY 17-92 #189**
14 CITY - ST - ZIP **CASSELBERRY, FL. 32707**

21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: *Mohammed Belayet Hossain*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-8-96

1107-834-1200

Day

Day, Time Phone

CR2E034 (3/96)