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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000019178 1. Corporation Name

OUICK STOP N GO INC

FILED Jan 27, 1999 8:00am **Secretary of State**

01-27-1999 90053 034 ***150.00

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Principal Place	of Business	Mailing	Address		-			i ilialiaal jia laite kian aant k	[[]] #8() #6)#)		
1461 W. BOYNTON BEACH BLVD BOYNTON BEACH FL 33435 US 1461 W. BOYNTON BEACH BLVD BOYNTON BEACH FL 33435 US					JLVO.			DO NOT WR	TE IN THIS	SPACE	· .
								 Date Incorporated or Qualifed 03/07/1994 	<u></u>		
2. Principal Pla	ace of Business	2a. Ma	iling Address					4. FEI Number			plied For
21		26						65-0473134			t Applicable
Suite, Apt.	#, etc.	Su	ite, Apt. #, etc.				1	5. Certificate of Status Desired		\$8.75 A	
22		27									
City & Ştate		⊢	ty & State					6. Election Campaign Financing		\$5.00 Added t	
23		28	. 		_4E.		-	Trust Fund Contribution			
Zip	Country	Zip)	Cou	ntry			This corporation owes the cur Personal Property Tax.	rent year int	angible □ Yes	□No
24	25	29		30				Name and Address of New	Registered		
	9. Name and Address of Current		ed Agent		81	Name		U. Name and Addisso of the			
DATE	L, MAHESH	1,11			"						
	W. BOYNTON BEACH BLVD.				82	Street A	Address	(P.O. Box Number is Not Accept	able)		1
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11. Pursuant	to the provisions of Sections 607.0502 agistered agent, or both, in the State of	2 and 607.1 of Florida. S	1508, Florida Statut Such change was a	tes, the a authorized	bove I by t	the corpo	oration's	board of directors. I hereby acce	pt the appo	intment as re	egistered
agent. I a	n familiar with, and accept the obligati	ions of, Se	ction 607.0505, Flo	orida Stati	utes.			•			Į
SIGNATURE								<u> </u>			i
0101111011									DATE		
	Signature, typed or printed name of registered agent				Agent	t signature red	equired who	en reinstating)	DATE FEICERS AT	ND DIRECTO	DRS IN 12
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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.