SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

P94000028202 (7)

RAFIQ FOODS, INC.

Principal Place of Business

SIGNATURE:

Mailing Address

FILED Aug 27 1998 8:00am Secretary of State



| 1401 EAST SAI POMPANO BEA | | | | 1401 EAST SAMPLE ROAD POMPANO BEACH FL 33064 | | | | DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified | |
|--|-------------------------------|---------|---|---|---------------------------|---|------------------------|--|--|
| | | | | | | | | 04/11/1994 | |
| 2. Principal P | lace of Busin | ess | 2a. Mailing 26 | 2a. Mailing Address 26 | | | | 4. FEI Number Applied For 65-0486057 Not Applicable | |
| Suite, Apt. | #, etc. | | Suite, | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired \$8.75 Additional Fee Required | |
| City & State | | | City & 28 | City & State | | | | 6. Election Campaign Financing \$5,00 May Be Trust Fund Contribution Added to Fees | |
| Zip | | Country | Zip | | Cou | intry | | 8. This corporation owes or has paid the current year Intangible | |
| 24 | 25 29 30 | | | | 30 | Personal Property Tax due June 30. Yes No | | | |
| 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent FARES SAMIR D 81 Name | | | | | | | | | |
| FARES, SAMIR R 1401 EAST SAMPLE ROAD | | | | | | | 140110 | | |
| | | | 82 Street Address (P.O. Box Number is Not Acceptable) | | | | | | |
| POMPANO BEACH FL 33064 | | | | | | | 83 | | |
| | | | | | | | | | |
| | | | | | | 84 | City | FL 85 Zip Code | |
| | | | | | | | | | |
| 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 | | | | | | | | | |
| 12. | OFFICERS AND DIRECTORS | | | | 13. | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
| TITLE | PD | | , | DELETE | 1.1 (() | 1.1 TITLE | | Change Addition | |
| NAME FARES, SAMIR R. | | | | | 1.2 NA | 1.2 NAME | | - • | |
| STREET ADDRESS 2400 NE 10TH ST #507 | | | | 1.3 STREET ADDRESS | | DDRESS | | | |
| CITY-ST-ZIP | ST-ZIP POMPANO BEACH FL 33064 | | | | 1.4 CITY-ST-ZIP | | IP II | | |
| TITLE | DELETE 2.1 | | 2.1 111 | 2.1 TITLE | | Change Addition | | | |
| NAME | | | | 221 | | 2.2 NAME | | | |
| STREET ADDRESS | | | | 2.3 \$TREET ADDRESS | | DDRE\$S | | | |
| CITY-ST-ZIP | | | | | | 2.4 CITY-ST-ZIP | | | |
| TITLE | | | | DELETE | 3.1 TITLE | | . | Change Addition | |
| NAME | \ | | | 3.2 NAME | | | | | |
| STREET ADDRESS | | | | 3.3 STREET ADDRESS | | | | | |
| CITY-S1-ZIP TITLE | | | | <u> </u> | 3.4 CITY-ST-ZIP 4.1 TITLE | | IP | | |
| NAME | DEEG | | | DELETE | 4.1 IIILE 4.2 NAME | | j | SOOODS62751 Sales LI Addition | |
| STREET ADDRESS | | | | 4.3 STREET ADDRESS | | nhocee | -08/27/9801001054 | | |
| CITY-ST-ZIP | | | | | | | ***300.00 | | |
| TITLE DELETE | | | | DELETE | | 5.1 TITLE | | | |
| NAME | | | | | | 5.2 NAME | | 10000名5371世外nge U Addition -08/27/9801001053/ | |
| STREET ADORESS | XORESS | | | 5.3 SYREET ADDRESS | | DORESS | 100/5/\do_1010h1_1022\ | | |
| CITY-ST-ZIP | | | | | | TY-ST-Z | i | - 1 *********************************** | |
| TITLE | | | | | | 6.1 TITLE | | Change Addition | |
| NAME | _ | | | 6.2 NA | . 6.2 NAME | | PE 1 | | |
| STREET ADDRESS | ET ADDRESS 6.33 | | | | 6.3 516 | 6.3 STREET ADDRESS | | 4.27 | |
| CITY-ST-ZIP | | | | | 6.4 CfT | 1Y-S1-Z | IP_ | 9 101 | |
| 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. | | | | | | | | | |

RAFIR FOOD INC.

1401 E. SAMPLE Road Pompano Beach, FL33064

P97000080218

P94000028202

Division of Corporation
Annual Report Filing
Po. Box 6327
Tallahassee, FL 32314

Dear officer: I had sent the annual reports, of RAFIQ Food INC and M.M.S. Enterprises INC.

for both Corporations ON MARCH 15,1998

But the check was Neves Cashed, and

I called ON June to vaify the receipt of

of my reports and closely, but was told to

Call buck in another month because the

processing Reiad is longer, Finally I got the

processing Reiad is longer, Finally I got the

Second Notices So I want to the

Second Notices So I want to the

bank and placed payment stop" on the

Check, and II sto Spoke to Someone at

check, and II sto Spoke to Someone at