

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

798-1999-2000

DOCUMENT # P9400032285

Corporation Name

T'S TREASURE INCORPORATED

Principal Place of Business

Mailing Address

5190 N.W. 167th ST  
SUITE 223

5190 N.W. 167th ST  
# 223

MIAMI FL 33014

MIAMI FL 33014

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

4/28/94

4. FEI Number

65-0603441

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fees Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☒ Yes ☐ No

Principal Place of Business

5190 N.W. 167th ST

2a. Mailing Address

5190 N.W. 167th ST.

Suite, Apt. #, etc.

223

Suite, Apt. #, etc.

223

City & State

MIAMI FL

City & State

MIAMI FL

Zip

33014

Country

DADE

Zip

33014

Country

DADE

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BILLOO, ZAKARIA A.  
5190 N.W. 167th ST # 223  
MIAMI FLORIDA 33014

81 Name

BILLOO, ZAKARIA A.

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

5190 N.W. 167th ST. # 223

83

84 City

MIAMI

FL

85 Zip Code

33014

1. 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

*[Signature]*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1/11/2000

2. OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME P.V.P. D. BILLOO, ZAKARIA  
2. STREET ADDRESS 5190 N.W. 167th ST. # 223  
3. CITY-ST-ZIP MIAMI FL 33014

1.1 TITLE P.V.P. D.  
1.2 NAME BILLOO, ZAKARIA  
1.3 STREET ADDRESS 5190 N.W. 167th ST # 223  
1.4 CITY-ST-ZIP MIAMI FL 33014

1. NAME  
2. STREET ADDRESS  
3. CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS 600003102436--1  
2.4 CITY-ST-ZIP -01/19/00--01044--001  
\*\*\*150.00 \*\*\*150.00

1. NAME  
2. STREET ADDRESS  
3. CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS 600003102436--1  
3.4 CITY-ST-ZIP -01/19/00--01044--002  
\*\*\*150.00 \*\*\*150.00

1. NAME  
2. STREET ADDRESS  
3. CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS 600003102436--1  
4.4 CITY-ST-ZIP -01/19/00--01044--003  
\*\*\*150.00 \*\*\*150.00

1. NAME  
2. STREET ADDRESS  
3. CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

1. NAME  
2. STREET ADDRESS  
3. CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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.

SIGNATURE: *[Signature]* ZAKARIA BILLOO President

1/11/2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

January 11, 2000

Secretary of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

REF: T'S Treasure Inc.  
Document number P 94000032285  
Annual Report for 1998, 1999 & 2000

Dear sir/madam,

Please find attached the annual reports for the year 1998, 1999, and 2000. We respectfully request that penalty for the late filing of the annual report be waived for the following reasons.

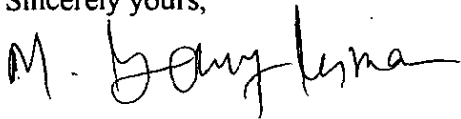
The address shown on the record of the Secretary of the State is incorrect. We never notified any one that our principal address or mailing address is 715 N. Main Street Trenton, Florida 32693. We have always been in the Dade County Florida and never had our mailing address reflected in your record. I do not understand how our address was changed in your record. Please refer to our last annual report filed for the year 1997 we are located in the city of Hialeah/Miami.

Due to incorrect address we did not receive the annual report or reminder from your office and therefor failed to file the annual report. Since we did not get the annual report, it was overlooked by us, and employee turnover in our office also did not help someone to investigate this. We apologize for any inconvenience and assure you that we have set up some procedure to avoid this situation to repeat. Please inform us how our address was changed in your record without our consent, specially in light of we never had any business in the city of Trenton.

In light of above reasons, please waive the late filing fee and update our new address in your file.

Thank you

Sincerely yours,



M. Yousuf Usman C.P.A.  
T's Treasure Incorporated

FILED  
00 JAN 13 AM 11:46  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA