

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

APPROVAL REPORT
1995



DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

DOCUMENT # P94000087627 (3)

95 MAY -1 AM 10:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H & S STOP-N-SHOP, INC.

725 E. EL PASO
CLEWISTON FL 33440

725 E. EL PASO
CLEWISTON FL 33440

DATE OF WHITE (If This SPACE)

3. Date of Report (If This SPACE) 3a. Date of Last Report

12/02/1994

2. Previous Report (If This SPACE)

2a. Previous Address

4. Filing Number

Approved For
Not Applicable

65-0535287

21. State of Report

26. State of Report

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

22. State of Report

27. State of Report

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

23. State of Report

28. State of Report

6. This corporation has authority for incorporation law under the
Florida Statutes ☐ Yes ☐ No

24. State of Report

25. State of Report

29. State of Report

30. State of Report

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MUSALLET, HESAM A
725 E. EL PASO
CLEWISTON FL 33440

81. Name

82. Street Address (P.O. Box Number or Not A Regulation)

83. City

84. State

FL

85. Zip Code

11. The report to the Department of State is being filed in accordance with the Florida Statutes. The above named corporation is not a corporation for the purpose of changing its registered office. The report is being filed in accordance with the Florida Statutes. The report is being filed in accordance with the Florida Statutes. The report is being filed in accordance with the Florida Statutes.

12. Name and Address of Current Registered Agent

13. Name and Address of New Registered Agent

D
MUSALLET, HESAM A
409 S. SAN PEDRO ST., APT. 11
CLEWISTON FL 33440

D
MUSALLET, SAMERA A
409 S. SAN PEDRO ST., APT. 11
CLEWISTON FL 33440

1. Name

2. Street Address

3. City

4. State

5. Zip Code

6. Name

7. Street Address

8. City

9. State

10. Zip Code

11. Name

12. Street Address

13. City

14. State

15. Zip Code

16. Name

17. Street Address

18. City

19. State

20. Zip Code

21. Name

22. Street Address

23. City

24. State

25. Zip Code

14. I, the undersigned, certify that the information supplied with this filing is complete, accurate and true, and that I am not qualified for the exemption stated in section 13.01, Florida Statutes. I further certify that the information is not being filed in violation of the Florida Statutes. I further certify that the information is not being filed in violation of the Florida Statutes. I further certify that the information is not being filed in violation of the Florida Statutes. I further certify that the information is not being filed in violation of the Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Hesam A. Musallet 4-2895 (813)483-8803