

995000014774

LARSON AND JONES

ATTORNEYS AT LAW

AN ASSOCIATION OF ATTORNEYS AND NOT A PARTNERSHIP

SHOREVIEW BUILDING, SUITE 216

9999 NORTHEAST 2ND AVENUE

MIAMI BEACH, FLORIDA 33139

TELEPHONE (305) 751-1851

FAX (305) 754-5426

GUSTAVE W. LARSON "RETIRED"
STEVEN L. JONES

February 17, 1995

FILED
FEB 21 AM 10:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OF COUNSEL
CESAR A. SASTRE

Secretary of State
Division of Corporations
409 East Gaines Street,
Tallahassee, Florida 32301

200001411932
-02/21/95--01136--009
****122.50 ****122.50


Re: Saishu, Inc.

Dear Sirs:


Please file the enclosed Articles of Incorporation for the subject entity. Also enclosed is the applicable filing fee. Time is of the essence and I would appreciate that this matter be expedited. Please return the certified copy of the Articles to this office as soon as possible.

Thank you for your attention to this matter.

Sincerely yours,


STEVEN L. JONES

SLJ:rhb
Enclosure.
Via Federal Express

2/22/95


CERTIFICATE OF INCORPORATION
OF

SAISHU, INC.

FILED
95 FEB 21 AM 10:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We, the undersigned, hereby associate ourselves together for the purpose of becoming a corporation under and pursuant to the provisions of the Laws of the State of Florida, of a corporation for profit, and do hereby certify as follows:

ARTICLE I

The name of the corporation shall be:

SAISHU, INC.

ARTICLE II

The corporation may engage in any activity of business permitted under the Laws of the United States and of the State of Florida.

ARTICLE III

The total number of shares of capital stock which may be issued by this corporation is ONE HUNDRED (100) shares at \$10.00 par value.

_____. All such stock shall be payable in cash, property, labor, or services at a just value to be fixed by the Board of Directors at a meeting called for that purpose.

ARTICLE IV

The amount of capital with which this corporation shall commence business is FIVE HUNDRED 00/100 (\$500.00) DOLLARS.

ARTICLE V

This corporation shall have perpetual existence unless sooner dissolved according to law.

ARTICLE VI

The principal place of business of said corporation shall be at 12314 Quail Roost Drive, Miami, Florida and the Registered Agent shall be NASIR KHALIL, at 12314 Quail Roost Drive, Miami, Florida, who is familiar with and accepts the obligations of the position of Registered Agent under Section §607.0505, Florida Statutes.

ACCEPTED: Nasir Khalil

with the privilege of having branch offices at any other place within the State and without the State.

ARTICLE VII

The number of Directors of this corporation shall be not less than One (1).

ARTICLE VIII

The names and street addresses of the first Board of Directors of this corporation who shall hold office for the first year, or until successors are chosen, shall be:

NASIR KHALIL
President/Director
157 N.W. 106th Avenue
Pembroke Pines, Florida 33026

ARTICLE IX

The names and street addresses of each person signing these Articles of Incorporation as a subscriber is as follows:

NASIR KHALIL

157 N.W. 106th Avenue
Pembroke Pines, Florida 33026

FILED
95 FEB 21 AM 10:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

IN WITNESS OF THE FOREGOING, we have hereunto set our
hands and seals and acknowledged to be filed in the Office
of the Secretary of State, the foregoing Certificate of
Incorporation, this 16 day of February,
1995.

Nasir Khalil (SEAL)
NASIR KHALIL

____ (SEAL)

____ (SEAL)

STATE OF FLORIDA

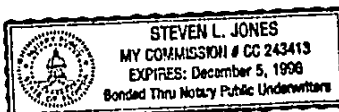
COUNTY OF DADE

~~NASIR KHALIL, who is personally known or who produced FL DL~~
~~K440-620-68020~~ as identification, personally appeared before me,
the undersigned authority, who are all known to me to be the
persons described in and who executed the foregoing Certificate
of and Articles of Incorporation, and who, after being by me
first duly sworn, on oath, depose and say, and did severally
acknowledge before me, that they are the parties who executed
and subscribed the foregoing Articles of Incorporation, and
did further acknowledge that the said Certificate is the
act and deed of the signers and respectively and respectfully
state that the facts and matters therein set forth are true
and correct.

WITNESS my hand and official seal at Miami, Dade County,
Florida, this 16 day of February, 1995.

Steven L. Jones
Notary Public, State of Florida
at Large

My commission expires:



P9500001477 4

LARSON AND JONES

ATTORNEYS AT LAW

AN ASSOCIATION OF ATTORNEYS AND NOT A PARTNERSHIP

SHOREVIEW BUILDING, SUITE 216

9999 NORTHEAST 2ND AVENUE

MIAMI SHORE, FLORIDA 33139

TELEPHONE (305) 751-1851

FAX (305) 754-5426

GUSTAVE W. LARSON "RETIRED"
STEVEN L. JONES

October 2nd, 1995

OF COUNSEL
CESAR A. SASTRE

Secretary of State
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32301

000001603820
-10/09/95--01026--012
*****87.50 *****87.50

Re: Saishu, Inc.
Document No. P95000014774

FILED
95 OCT -6 PM 3:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dear Sirs:

Please find the enclosed Articles of Amendment and return a certified copy thereof to this office in the envelope provided. Also enclosed is the applicable filing fee.

Sincerely yours,


STEVEN L. JONES

SLJ:rhb
Enclosure.

AMEND
10/16
10-12

**ARTICLES OF AMENDMENT
OF
SAISHU, INC.**

95 OCT -6 PM 3:24
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The undersigned, in accordance with Section 607.1006, Florida Statutes, hereby amends the Articles of Incorporation of SAISHU, INC., a Florida corporation, as follows:

1. Article VIII, of the Articles of Incorporation of SAISHU, INC., filed in Tallahassee on February 21, 1995, is hereby amended to read as follows:

The names and street addresses of this Corporation, who shall hold office for the first year, or until successors are chosen, shall be:

HUSAM N. BAHHUR
President/Director
12314 Quail Roost Drive
Miami, Florida

2. The foregoing Amendment was adopted by the undersigned incorporator without shareholder action, there being no shareholders at present.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Amendment, this 8 day of September, 1995.



NASIR KHALIL

STATE OF FLORIDA)
) ss.
COUNTY OF BROWARD)

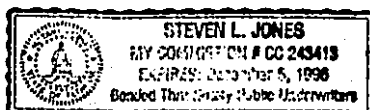
BEFORE ME, the undersigned authority, personally appeared NASIR KHALIL, who is personally known or who produced as identification, known to me to be the person who executed the foregoing Articles of Amendment, and he acknowledged before me that he executed these Articles of Amendment for the purposes therein stated.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 8 day of September, 1995.



Name: Steven L. Jones
Notary Public,
State of Florida

My Commission Expires:



PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

AND
FILED
96 NOV 12 PM 12:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 995000014774

1. Corporation Name

Saishu Inc.

Principal Place of Business

Mailing Address

12396 Quail Roost Dr
Miami, FL 33177

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Address, If Applicable

4. Date incorporated or Qualified
To Do Business in Florida

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0620644

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED ☐

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip
Pres.	Husam Bahhur	4680 NE 2ND AVE	miami FL 33137

800002006608--2
-11/18/96--01004--022
****375.00 ****375.00

8. Name and Address of Current Registered Agent

9. Name and Address of Non-Registered Agent

Husam Bahhur
13434 SW 91 Ave
Miami FL 33186

Name

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

Suite, Apt. #, Etc.

City

State

Zip Code

FL

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

Husam Bahhur

REGISTERED AGENT MUST SIGN

Date 10-23-96

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐

(See other side for information
on intangible tax.)

12. 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 release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all fees owed by the corporation have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Husam Bahhur

Husam Bahhur Pres

10-23-96 305-552-7384

SIGNATURE AND TYPED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CRS2043 (12/95)

P95000014774

J.V.C. ACCOUNTING, INC.

10028 S.W. 16TH STREET
PEMBROKE PINES, FLORIDA 33025
Tel. (954) 436-7542 Fax (954) 433-9895

Beepers (954) 390-2390 (305) 540-5464

FILED
97 MAY -7 PM 4:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

April 30, 1997

Department of State
Division of Corporations
409 E. Gaines Street
Tallahassee, Fl. 32399
Attn: Annette Hogan

100002170381--3
-05/06/97--01101--001
*****82.50 *****30.00

Dear Annette:

Re: Harbi Enterprises, Inc. Document # L34886
d/ba/ New Way Supermarket

100002170381--3
-05/07/97--01128--001
*****40.00 *****40.00

Enclosed please find check # 1792 \$ 82.50 to cover the expense for
a certified copy of the articles of incorporation and a certified copy of the d/b/a/.

Please mail them to the above address via Fed Exp A/C 168 7666 96

Thank you in advance for all your help.

Yours truly,


Jeannette Campbell

G97126900026--4
-05/06/97--01101--001
*****82.50 - 30.00
F.2

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

AMENDED

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra S. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000014774**
1. Corporation Name
SAISHU INC.

FILED
97 MAY -7 PM 4:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
**12396 Quail Roost Dr
Miami, FL 33177**

3. Date Incorporated or Qualified	4. Date of Last Report
5. FEI Number 65-0620644	Applied For <input type="checkbox"/> Not Applicable
6. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
7. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country

9. Name and Address of Current Registered Agent

**Steven L. Jones Esq.
4999 N.E. 2nd Ave #2/b
Miami FL 33138**

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83. City
84. State
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

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

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input checked="" type="checkbox"/> DELETE	11 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Pres. MOHAMMAD M. SHOUHAN	12 NAME	MAYSA SHOUHAN
STREET ADDRESS	12396 Quail Roost Dr.	13 STREET ADDRESS	12396 Quail Roost Dr.
CITY-ST-ZIP	MIAMI FL	14 CITY-ST-ZIP	MIAMI FL 33177
TITLE	<input type="checkbox"/> DELETE	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY-ST-ZIP		24 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/5/97 305-252-7388

CR2E034 (9/96)