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

**PROFIT** CORPORATION ANNUAL REPORT



Secretary of State DIVISION OF XORPORATIONS

1998 DOCUMENT # P95000056393 (8)

BLUE NILE MARKET, INC.

## **FILED** Apr 28 1998 8:00am Secretary of State



8041 N.W. 22						
		8041 N.W. 22 AVE				
MIAMI FL 331	47	MIAMI FL 33147		DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualified	SFACE	
1				07/20/1995		
2. Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21 322	I N.W 75TH TERREE	26 3221 N.1	175TH TRRECE	5 65-0602844	Not Applicable	
Suite, Apt	#, etc	Suite Apt. #, etc.			\$8.75 Additional	
22	1	27		5. Certificate of Status Desired	Fee Required	
	9 1 -/	City & State	, ec	6. Election Campaign Financing	\$5.00 May Be	
23 HOO	Lyword - F.C. Country  BROWDED	City & State 28 1/ 00 L X W or	d./	Trust Fund Contribution	Added to Fees	
Zip"	Country	70		8. This corporation owes or has paid the co		
24 3302	14 25 BROWERD	29 33024	30 BROWBRD	Personal Property Tax due June 30.	Yes No	
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered	Agent	
MUSA, MUTASIM B1 Name						
800 N. MIAMI AVE.			82 Street Addr	82 Street Address (P.O. Box Number is Not Acceptable)		
#910 E						
MLA	AMI FL 33136		83		ļ	
			84 City	FI	85 Zip Code	
44 0 45 1001	of Sections 607 0103	and CO7 14 09 Handa Statu	los the above powed core	poration submits this statement for the purpose	_ , ,	
office or n	egistered agent, or bolh, in the State c	ann 607 1306, Fiorida Statu If Florida. Such change was	authorized by the corporat	solation's board of directors. I hereby accept the ap	pointment as registered	
agent Lai	m familiar with, and accept the obligat	ions of, Section 607.0505, Fi	orida Statutes.			
SIGNATURE	MUTBEIN MM	- cun	C Registered Agent signature requir	<u> </u>		
12,	Signature, typed or justiful name of register at agest OFFICERS AND	and the if applicable (NO) DIDLOTODE	E Registered Agent signature require 13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12	
TITLE	Ph	DELETE	11 TITLE	- ADDITIONS/OFFARGES TO OFFICERS AN	Change Addition	
NAME	ABDELRMAN, ABDELAZIZ		12 NAME	P. D. KHALID		
STREET ADDRESS	219 NORTHWEST 16TH STREE	FT #9	1.3 STREET ADDRESS	JUSON MIAM AVE # 9 16	s G	
	MIAMI FL 33136	51) W.C.	1.3 STREET ADVINESS	8 mid Mi F( 23)36	·-	
CITY-ST-ZIP TILE	VD VD	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	P.D. KHALID nuso. KHALID 800 N. MIAM, AVE #916 MIAM, FC 3176	Change Addition	
NAME	MUSA, MUTASIM	beech	2.2 NAME	Same	C oversão C valendos	
	800 NORTH MIAMI AVENUE, 4		a a mentric			
STREET ADDRESS	ייין אייין אייי	1010E	0.0.070551 4000500			
	MIAME EL 22120	1910E	2 3 STREET ADDRESS			
CITY ST ZIP	MIAMI FL 33138		2 4 CITY-ST-ZIP		Change Addition	
THE	MIAMI FL 33136	P910E	2 4 CITY-ST-ZIP 3 1 TITLE		Change Addition	
TITEE NAME	MIAMI FL 33136		2 4 CITY-S1-ZIP 31 TITLE 3.2 NAME		Change Addition	
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indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am a 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 it changed, or on an attachment with an address.

SIGNATURE:

MUTASIM MUSB MEASINGMEN
ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

19541436.2320