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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000074757 (2)
1. Corporation Name

79TH STREET ONE STOP, INC.

Principal Place of Business Mailing Address 905 N.W. 79TH STREET 905 N.W. 79TH STREET MIAMI FL 33150 MIAMI FL 33150-3139 3a. Date of Last Report 03/25/1996 3. Date Incorporated or Qualified 09/27/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0624254 21 26 Not Applicable Suite, Apl. #, etc. Suite. Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zip Country 8. This corporation has liability for intangible tay under s. 199.032, 24 30 Yes No 25 Florida Statutes 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name TUBAUSHAT, AHMAD I 903 AND 905 N.W. 79TH ST Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33150** 63 84 City 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 reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. PVSD ☐ DELETE Change Addition 1.1 TITLE TITLE TUBAISHAT, AHMAD I NAME 1.2 NAME 903 AND 905 79TH STREET STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-7P 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-\$1-76 2 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-ZIP DELETE 7171.5 41 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 43 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Change DELETE TITLE 51 TITLE Addition NAME 52 NAME STREET ADDRESS **5 3 STREET ADDRESS** CITY - ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE NAME 62 NAME

> 63 STREET ADDRESS 64 CITY-ST-ZIP

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

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

SIGNATURE:

appears in Block 12 or Blog

STREET ADDRESS

AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

AHMEDTUBAISHAT 2/15/97 305-696.

FILED

Feb 21 1997 8:00am

Secretary of State