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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000079931 (8)

OMAR SANKAR'S SONS COMPANY, INC.

Principal Place of Business 12925 N.W. 27TH AVE. MIAMI FL 33167

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Maiting Address

12925 N.W. 27TH AVE. MIAMI FL 33167

## FILED Apr 01 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
10/18/1995

4. FEI Nurnber
Applied For

| Principal Plac                                  | e of Business | 2a. Mailing Address |                     |          |  | 10/18/1995 4. FEI Number Applied For Applied For       |   |  |  |  |
|---|---------------|---------------------|---------------------|----------|--|--|---|--|--|--|
| Sulte, Apt. #.                                  | elc.          | <u> </u>            | Suite, Apt. #, etc. |          |  | 65-0638985  6. Certificate of Status Desired □         | Mot Applicable d \$8.75 Additional Fee Required |  |  |  |
| City & State                                    | <del></del>   | City & State        | <b>├</b> ¬ '''      |          |  | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 May Be<br>Added to Fees                  |  |  |  |
| Zip<br>1  | Country 25    | Ζίρ<br><b>29</b>    | <u> </u>            |          | Personal Property Tax due June 30.  Yes No   |  |   |  |  |  |
| 9. Name and Address of Current Registered Agent |               |                     |                     |          | 10. Name and Address of New Registered Agent |  |   |  |  |  |
| ADALIAN, MOUNZEN                                |               |                     |                     | 81<br>82 |  |  |   |  |  |  |
| ****  |               |                     |                     | 83       |  |  |   |  |  |  |

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, and accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505. Florida Statutes.

| agent. I a     | m familiar with, and accept the obligations of, Section 607                  | .0505, Florid | a Statutes.               | 20,2 200,000               | ooto, o             | appenditon do | 5.0.0.00   |
|----------------|--|---------------|---------------------------|----------------------------|---------------------|---------------|------------|
| SIGNATURE      | Signature, typed or purpled name of registered agent and title if applicable | (NOTE: Re     | egistered Agent signature | required when reinstating) | - D                 | ATE           | ·          |
| 12.            | OFFICERS AND DIRECTORS   |               | 13.                       |                            | CHANGES TO OFFICERS |               | S IN 12    |
| TITLE          | <b>D</b>   | ELETE         | 1.1 TITLE                 |                            |                     | Change        | ☐ Addition |
| NAME           | Sankar, abdul-rahim  |               | 1.2 NAME                  |                            |                     |               |            |
| STREET ADDRESS | 12925 N.W.27TH AVE.  |               | 1.3 STREET ADORESS        |                            |                     |               |            |
| CITY-ST-ZIP    | MIAMI FL 33167   |               | 1.4 CITY-ST-ZIP           |                            |                     |               |            |
| TITLE          | D  | ELETE         | 2.1 TITLE                 |                            |                     | ☐ Change      | Addition   |
| NAME           | SANKAR, MOHAMMAD A   |               | 2.2 NAME                  |                            |                     |               |            |
| STREET ADDRESS | 12925 N.W.27TH AVE.  |               | 2.3 STREET ADDRESS        |                            |                     |               |            |
| CITY-ST-ZIP    | MIAMI FL 33167   |               | 2. 4 CITY - ST - ZIP      |                            |                     |               |            |
| TITLE          | D  | ELETE         | 3.1 TITLE                 |                            |                     | Change        | Addition   |
| NAME           |  |               | 3.2 NAME                  |                            |                     |               |            |
| STREET ADDRESS |  |               | 3.3 STREET ADDRESS        |                            |                     |               |            |
| CITY-ST-ZIP    |  |               | 3.4. CITY - ST - ZIP      |                            |                     |               |            |
| TITLE          |  | ELETE         | 4.1 TITLE                 |                            |                     | Change        | Addition   |
| NAME           |  |               | 4. 2 NAME                 |                            |                     |               |            |
| STREET ADDRESS |  |               | 4.3 STREET ADDRESS        |                            |                     |               |            |
| CITY-ST-ZIP    |  |               | 4.4 CITY - ST - ZIP       |                            |                     |               |            |
| TITLE          |  | ELETE         | 5.1 TITLE                 |                            |                     | Change        | Addition   |
| NAME           |  |               | 5.2 NAME                  |                            |                     |               |            |
| STREET ADDRESS |  |               | 5.3 STREET ADDRESS        |                            |                     |               |            |
| CITY-ST-ZIP    |  |               | 5.4 CITY - ST - ZIP       |                            |                     |               |            |
| TITLE          | □ □  | ELETE         | 6.1 TITLE                 |                            |                     | Change        | Addition   |
| NAME           |  |               | 6.2 NAME                  |                            |                     |               |            |

14. Thereby 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.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

V.

3-24-95

JAZE(384 (10/97)

Zip Code