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 # P96000005406 (9)

Principal Place of Business	Mailing Address
755 NORTHWEST 72 AVENUE, PLAZA 19/25	JHANGIMAL, SONIA

FILED May 06 1998 8:00am Secretary of State

SAI DU	JTY FREE, INC.	•				4 HARMAGU UN JAMA AUM ARIH RAHN AANK ARKK	âlăl Aifel Blaif An	111 0 à 111 1 00 1
Principal Plac	e of Business	Mailing Address				1 19811981 118 58146 81511 88111 88111 88511 88511	Atal Billi Aláil bá	110 0111 1001
755 NORTHWEST 72 AVENUE. PLAZA 19/25 JHANGIMAL, SONIA MIAMI FL 33126 9425 SW 91ST STREET MIAMI FL 33176				DO NOT WRITE IN THIS	S SPACE			
						3. Date Incorporated or Qualified 01/17/1996		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	- I Ar	oplied For
21	,, ,,, ,,, ,,, ,,, ,,, ,,, ,,					65-0636019	Not Applicable	
Suite, Apt	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75	Additional
22		27				6. Cartificate of Status Desired		equired
City & Stat	е	City & State		6. Election Campaign Financing		May Be		
Zip	Country	28 Zip	<u></u>			Trust Fund Contribution		to Fees
24	25	29	30	n iti y		This corporation owes or has paid the c Personal Property Tax due June 30.		tangibie
24	9. Name and Address of Current		[30]	ļ		10. Name and Address of New Registere		
HI.	ANGIMAL, SONIA			81	Name			
	25 SW 91ST STREET			82	Street Add	ress (P.O. Box Number is Not Acceptable)		
	AMI FL 33126				Olibbit Addi	reas (1.0. Box Herricon is Not Modephable)		
				83		***************************************		
				84	City		85 Zip	Code
				İΙ	•	F	L. '	
11. Pursuant office or r	t o the provisions of Sections 607.0502 r egiste red agent, or both, in the State o	and 607.1508, Florida Statut f Florida. Such change was a	es, the a authorize	bove d by	-named corp the corporat	poration submits this statement for the purpose tion's board of directors. I hereby accept the appropriate the second of directors are second or directors.	of changing it opointment as	is registered registered
agent. La	im familiar with, and accept the obligati	ons of, Section 607.0505, Flo	orida Sta	tutes		O.L.	120/98	
SIGNATURE	Signature, typed or printed name of registured ago	enal	E. Booletoro	d Ago	nl e-malura tadul	red when reinstating) DATE	10/10	
12.	OFFICERS AND		13.	u Age	ni pghathe requi	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	1S IN 12
TITLE	PTD	☐ DELETE	1.1 11	TLE			Change	☐ Addition
NAME	JHANGIMAL, SONIA DIPU 121		1.2 N	AME				ļ
STREET ADDRESS	755 NORTHWEST 72 AVENUE	, PLAZA 19/25	13 STREET ADDRESS		ADDRESS			
CITY-ST-ZIP	MIAMI FL 33126		1.4 0	(TY-S	T-ZIP			
TITLE	VSD	Z DELETE	21 T				Change	☐ Addition (
NAME	JHANGIMAL, DIPU J	DI 474 40/05	2 2 N					
STREET ADDRESS	755 NORTHWEST 72 AVENUE	, PLAZA 19/25			address			
CITY-ST-ZIP	MIAMI FL 33128	DELETE	2 4 C		IT-ZIP		Change	☐ Addition
TITLE NAME		FT percit	3 1 10 3 2 N		}		- viango	
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP					T-ZIP			
TITLE		DELETE	4110				Change	☐ Addition
NAME			4. 2 N	IAME				
STREET ADDRESS			4.3 S	TAEET	ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP		T-ZIP			
TITLE		☐ DELETE	5.1 THL		1		☐ Change	☐ Addition
NAME			5.2 N					
STREET ADDRESS					ADDRESS			1
CITY-ST-ZIP		DELETE	5.4 CITY		T - ZIP		Change	Addition
TITLE		□ DELEN	6.1 To				C Change	L MUGILIUN
NAME			62 N		VDDDCCC			
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP	certify that the information supplied with	this filing does not qualify for		ITY-S empi		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.

SONIA. D. JHANGIMAL 04/20/90