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 #
1. Corporation Name

P96000084578 (9)

BHAIJI SHAIKH, INC.

Principal Place of Business Mailing Address

8424 N.W. 23RD MANOR WEST

8424 N.W. 23RD MANOR WEST

FILED May 04 1998 8:00am Secretary of State



CORAL SPRINGS FL 33065	CORAL SPRINGS FL 33065		DO NOT WRITE IN THIS	C ODACE	
				3. Date Incorporated or Qualified	SPACE
				10/10/1996	
2. Principal Place of Business	2a. Mailing Address			4, FEI Number	Applied For
21 3205 North Federal Highwa		ersity	Drive	65-0717230	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
City & State	27 201 City & State				Fee Required
23 Pompano Beach, FL	28 Coral Sprin	oe FI		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Zip	Country	,	8. This corporation owes or has paid the c	
24 33064 25 USA	29 33067	30 USA	A	Personal Property Tax due June 30.	X Yes No
g. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registered	j Agent
MONIOUDIS, PERRY D		81	Name		
4520 NE 18TH AVE		82	Street A	ddress (P.O. Box Number is Not Acceptable)	
STE 101 Ft lauderdale Fl 33334		63			
FI LAUDENDALE PE 33334					
		84	City	FI	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502	and 607.1508, Florida Statut	es, the above	e-named c	corporation submits this statement for the purpose	of changing its registered
agent. I am familiar with, and accept the obliga	of Florida. Such change was a itions of, Section 607.0505, Flo	authorized by orida Statute:	y the corpo s.	oration's board of directors. I hereby accept the ap	pointment as registered
SIGNATURE					
Signature, typed or printed name of registerist ager 12. OFFICERS AND			eni signature re	equired when reinstating) DATE	ID DIDECTORS W.
12. OFFICERS AND	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
NAME BHAUI, MOHAMMAD M		1,2 NAME			
STREET ADDRESS 8424 N.W. 23RD MANOR W	est	1.3 STREET	ADDRESS		
CITY-ST-ZIP CORAL SPRINGS FL 33065		1.4 CITY - S	T- ZIP		
TITLE D	☐ DELETE	2.1 TITLE			Change Addition
NAME BHAIJI, NASREEN A		2.2 NAME	İ		
STREET ADDRESS 8424 N.W. 23RD MANOR W	EST	2.3 STREE1			
CITY-ST-ZIP CORAL SPRINGS FL 33065	DELETE	2. 4 CITY - 3 3.1 TITLE	ST-ZIP		Change Addition
NAME	- Detterie	3.2 NAME	Ī		Change Addition
STREET ADDRESS		3.3 STREET	ADDRESS		
CITY-ST-ZIP		3.4. CITY-5			
TITLE	☐ DELETE	4.1 TITLE			Change Addition
NAME		4. 2 NAME	1		
STREET ADDRESS		4.3 STREET	ADDRESS		
CITY-ST-ZIP	D OCUETA	4.4 CHTY-S	T-ZIP		
TITLE	L_ DELETE	5.1 TITLE			☐ Change ☐ Addition
NAME STREET ADDRESS		5.2 NAME	ADDDECO		
CITY-ST-ZIP		5.3 STREET 5.4 CITY - S	I		
TITLE	DELETE	6.1 TITLE	1-511		☐ Change ☐ Addition
NAME		6.2 NAME			· · · —
STREET ADDRESS		6.3 STREET	ADDRESS		
CITY-ST-ZIP		6.4 CITY-S	T- ZIP		

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 attrichment with an address.

07. /27 /08