
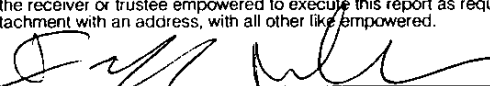


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 10, 2008 8:00 am
Secretary of State

07-10-2008 90016 029 ***150.00

DOCUMENT # P96000089037			
1. Entity Name NASER, INC.			
Principal Place of Business 400 S STATE ST BUNNELL, FL 32110 US		Mailing Address P.O. BOX 685 BUNNELL, FL 32110	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent MUBARAK, FATIHA L 3932 CREE DR ORMOND BEACH, FL 32174		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
FILE NOW!!! FEE IS \$550.00 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MUBARAK, FATIHA L 3932 CREE DR ORMOND BEACH, FL 32174 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		9/10/2008 386-437-2005	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

40110162



07042008 Chg-P CR2E034 (12/06)

4. FEI Number **57-1058410** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

ATTACHMENT

40110182

P096000089037

To.
FLORIDA DEPT.OF CORPORATION
FOODMARKET
DIVISION OF CORPORATION

From.
NASER INC./NORAH

PO Box 685
BUNNELLFL32110

REF: DOUCUMENT#P96000089037

DEAR SIR OR MADAM

I AM WRITING IN REFERENCE TO YOUR NOTICE THAT WE DID NOT SEND THE ANNUAL REPORT FOR THE CORPORATION. WE DID SEND THE REPORT THE END OF MARCH CAME BACK THE END OF MAY AS IT IS NOT SIGNED WE DID SEND IT BACK ON THE 4TH OF JUNE IN THE MAIL WITH CHECK FOR \$150.00 WE ONLY HAVE THE CHECK STUB WE CHECKED OUR ACCOUNT THE CHECK DID NOT CLEAR YET.

SORRY FOR THE DELAY HOPE YOU GOT IT, IF NOT WE ARE SENDING NEW ANNUAL REPORT WITH NEW CHECK WITH MANY THANKS TO YOUR PATIENTS AND UNDERSTANDING OF THE SITUATION.

ENCLOSED COPY OF OUR CHECK RECORD SENT ON JUNE 4TH 2008

HOPING TO ACCEPT OUR SINCERE APOLOGY

FAITHFULLY

FATIHA MUBARAK

1371

Khaled Mubarak

DATE *5/19/08*

PAY TO *Fatima Mubarak*

FOR

TOTAL	
THIS CHECK	1687 -
OTHER TRANS +/-	
BALANCE	

TAX DEDUCTIBLE ☐

XPP-3 YELLOW

ATTACHMENT

46110182

#P96000089037

1371

DATE *5/19/08*

PAY TO *Fatima Mubarak*

FOR

TOTAL	
THIS CHECK	1687 -
OTHER TRANS +/-	
BALANCE	

TAX DEDUCTIBLE ☐

XPP-3 YELLOW

1372

DATE *5/04/08*

PAY TO *Florida Dept of Corporation/Insurance Corporation*

FOR

TOTAL	
THIS CHECK	150 -
OTHER TRANS +/-	
BALANCE	

TAX DEDUCTIBLE ☐

XPP-3 YELLOW

ATTACHMENT

40110182
41 096000089037

NASER INC D/B/A
NORAH FOOD MARKET
(386) 437-9685
P O BOX 685
BUNNELL, FL 32110-0685

1398

63-215/631

DATE

5/1/04/2008

PAY
TO THE
ORDER OF

Florida Dept. of State

\$ 150⁰⁰

One Hundred fifty two

DOLLARS



Security
Features
Details at
www.ach.org



ACH RT 061000104

FOR

096000089037

File Rec

⑈001398⑈ ⑆063102152⑆ 1000050800837⑈