## **2003 FOR PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR

Mailing Address

6136 GRAND BLVD.

**NEW PORT RICHEY FL 34652** 

## P96000099825 **DOCUMENT #**

1. Entity Name

6136 GRAND BLVD.

Principal Place of Business

NEW PORT RICHEY FL 34652

QUICK STOP INC OF KISSIMMEE



FILED Jan 10, 2003 8:00 am Secretary of State

01-10-2003 90035 049 \*\*\*150.00

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. FEI Number 59-3414686	Applied For

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Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES			
City & State		City & State		4.	J5 34 14000		Applied For	
Zip		Country	Zip Country		5.	Certificate of Status Desired S8.75 Addition Fee Required		
6. Name and Address of Current Registered Agent			7.	7. Name and Address of New Registered Agent				
			. Name	Name				
SAINI, GURMINDERPAL S								
6136 GRAND BLVD.			Street	Street Address (P.O. Box Number is Not Acceptable)				
NEW PORT RICHEY FL 34652				<u>-</u>				
11211 1 01	II INCIEL I	L 04002						
	-			City			Zip C	
8. The above	named entity	submits this statement fo	r the purpose of changing its	registered office	or registered a	gent, or both, in the State of Florida. 1	<u>l</u> am familiar wit	rh and accept
the obligat	tions of registe	ered agent.	1			• • • • • • • • • • • • • • • • • • •	2111 (C.11111)C1 VVI)	ir, and accept
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SIGNATURE	Signature, typed of	or printed name of registered agent	and title if annicable (NOT)	E: Bodistored Assat size	70 -	<u> </u>	100	
			THO II	E: Registered Agent sign	lature required when	reinstating) 1DAT	Έ <b>\</b>	
F	ILE NOW!!!	FEE IS \$150.00						
After May 1, 2003 Fee will be \$550.00				9. Election Campaign Financing	_ \$5	.00 May Be		
Make Check	Payable to	Florida Department of	State			Trust Fund Contribution.	∐ Add	led to Fees
10.		OFFICERS AND	DIRECTORS	11.	- Ai	DDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	IDQ INI 11
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12. I 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 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:

