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

**PROFIT** CORPORATION **ANNUAL REPORT** 

**19**98

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CITY-ST-ZIP

STREET ADDRESS

Block 12 or Block 13 if changed, or on an attachy

CITY-ST-ZIP

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P97000090229 (0)

H & K INC OF TAMPA BAY

Principal Place of Business Mailing Address 6103 MARBELLA BLVD. 6103 MARBELLA BLVD. APOLLO BEACH FL 33572 APOLLO BEACH FL 33572 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/21/1997 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country  $Z_{(i)}$ Country 8. This corporation owes or has paid the current year Intangible 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 Name HAFEEZ, JAVED 6103 MARBELLA BLVD. Street Address (P.O. Box Number is Not Acceptable) APOLLO BEACH FL 33572 83 84 City Zip Code 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or pointed name of registered agent and life if applicable (NOTE: Registered Agent signature required whon reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE ☐ DELETE Sciretary Change Addition 11 TITLE HASAN HASHMI NAME 12 NAME 1001 Livingston Are. STREET ADDRESS 1.3 STREET ADDRESS Lutz, FC 33549 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE President Change 2.1 TITLE Addition JAVED HAFEEZ NAME 2.2 NAME 6103 MARDELLA BLWO. STREET ADDRESS 2.3 STREET ADDRESS APOULO BEACH, PL 33572 CITY-ST-ZIP 2.4 CITY-ST-ZIP ☐ DEL FTE 3.1 TITLE Change Addition BIRECTOR NAME 3.2 NAME ARJUMAND F. HASHMI STREET ADDRESS 18123 LONGWATER RUN DR. 3.3 STREET ADDRESS TAMPA FL 33647 CITY-ST-ZIP 3.4. CHTY-ST-ZIP DELETE TREASURER TITLE 4.1 TITLE Change Addition SHAHNAZ KHAN NAME 4. 2 NAME 11310 GRANDVIEN DR. STREET ADDRESS 4.3 STREET ADDRESS DADE CITY PL 33525 CITY-ST-ZIP 4.4 CITY-ST-ZIP VICE- PRESIDENT DELETE TITLE 5.1 TITLE Change Addition SHAHEEN FIDA NAME 5.2 NAME 2365 HADDON HALL PL STREET ADDRESS 5.3 STREET ADDRESS

5.4 CITY - ST- ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

**FILED** Apr 28 1998 8:00am Secretary of State



14. I hereby certify that the information supplied with the 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 it made under oath; that I am an officer or director of the corporation or the receiver or trustee empoyered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

Addition

☐ Change

CLEARWATER, PC 33764

117/00