

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

FILED
Apr 16 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # p 97000105569
1. Corporation Name

GROVE CHECK CASHING AND BEEPERS, INC.

Principal Place of Business

Mailing Address

3725 Grand Avenue
Miami, Florida 33133

3725 Grand Avenue
Miami, Florida 33133

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12-15-97

4. FEI Number

65-0824834

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐

Yes

☒

No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

9. Name and Address of Current Registered Agent

Awida Aiman
20910 SW 83rd Avenue
Miami, Florida 33189

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

10. Name and Address of New Registered Agent

81 Name

Mustafa Najjar

82 Street Address (P.O. Box Number is Not Acceptable)

3725 Grand Avenue

83

84 City

Miami

FL

85 Zip Code

33157

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 of the person named as registered agent and the applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Mustafa Najjar, President

4-8-98

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President/VicePresident Change ☒ Addition
1.2 NAME Secretary/Treasurer
1.3 STREET ADDRESS Mustafa Najjar, 3725 Grand Avenue
1.4 CITY-ST-ZIP Miami, FL 33133 ☐ Change ☐ Addition

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME 600002491028
3.3 STREET ADDRESS -04/16/98--01051--011
3.4 CITY-ST-ZIP ***8.75

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME 600002491026
4.3 STREET ADDRESS -04/16/98--01051--010
4.4 CITY-ST-ZIP ***150.00

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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.

SIGNATURE: X

Signature of the person named as registered agent and the applicable

Mustafa Najjar, Pres.

4-8-98

(305) 476-0012

Date

Deadline

CR2E034 (10/97)