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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000017781

1. Corporation Name

DOUBLE DISCOUNT AUTO SALES INC.

Principal Place of Business

4037 UNIT 2 APALACHEE PARKWAY
TALLAHASSEE FL 32311-4128

Mailing Address

4037 UNIT 2 APALACHEE PARKWAY
TALLAHASSEE FL 32311-4128

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

934 Maplewood Ave

27

Suite, Apt. #, etc.

28

City & State

29

Zip

Country

30

USA

9. Name and Address of Current Registered Agent

GUENOUN, MOHAMED
4037 UNIT 2 APALACHEE PARKWAY
TALLAHASSEE FL 32311-4128

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/24/1998

4. FEI Number

59-3497573

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 the current year intangible
Personal Property Tax ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

Yusuf S. HASCICEK

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

83

934 Maplewood Ave

84 City

Tallahassee

FL

85 Zip Code

32303

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 *Mohamed Guenoun*

Mohamed Guenoun

President 2/15/99

Signature, typed or printed name of registered agent, if not applicable

(NOTE: Registered Agent's name is required when the corporation is a corporation)

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME GUENOUN, MOHAMED
STREET ADDRESS 4037 UNIT 2 APALACHEE PARKWAY
CITY-ST-ZIP TALLAHASSEE FL 32311-4128

TITLE VD ☒ DELETE

NAME BILAL, BAKRI
STREET ADDRESS 4037 UNIT 2 APALACHEE PARKWAY
CITY-ST-ZIP TALLAHASSEE FL 32311-4128

TITLE S ☐ DELETE

NAME HASCICEK, YUSUF S
STREET ADDRESS 4037 UNIT 2 APALACHEE PARKWAY
CITY-ST-ZIP TALLAHASSEE FL 32311-4128

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Secretary Mohamed Guenoun 4037 Apalachee Parkway #2 Tallahassee FL 32311-4128

President Hascicek, Yusuf S 934 Maplewood Ave Tallahassee FL 32303

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****150.00 ****150.00

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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, with all other like empowered

SIGNATURE:

Yusuf S. Hascicek
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Yusuf S. Hascicek

2/15/99

509-2491

CR2E034 (11/98)