

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Apr 23, 1999 8:00 am
Secretary of State

04-23-1999 90160 006 ***150.00

DOCUMENT # P98000033893

1. Corporation Name

RASSAS BROTHERS, INC.

Principal Place of Business

8318 VOLUSIA PLACE
TEMPLE TERRACE FL 33637

Mailing Address

8318 VOLUSIA PLACE
TEMPLE TERRACE FL 33637



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/13/1998

4. FEI Number

59-3512365

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

2. Principal Place of Business

21 11142 N. 30th ST.

Suite, Apt. #, etc.

22 City & State

23 TAMPA, FLORIDA

Zip

24 33612

Country

25 USA

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28

Zip

29

Country

30

9. Name and Address of Current Registered Agent

KAYALI, OSAMA
8034 DEERWOOD CIRCLE
TAMPA FL 33610

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 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 printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE
NAME RASSAS, MAGED S
STREET ADDRESS 8318 VOLUSIA PLACE
CITY-ST-ZIP TEMPLE TERRACE FL 33637

TITLE VPD ☐ DELETE
NAME RASSAS, MAZEN S
STREET ADDRESS 8318 VOLUSIA PLACE
CITY-ST-ZIP TEMPLE TERRACE FL 33637

TITLE SD ☐ DELETE
NAME RASSAS, ABD S
STREET ADDRESS 8318 VOLUSIA PLACE
CITY-ST-ZIP TEMPLE TERRACE FL 33637

TITLE TD ☐ DELETE
NAME RASSAS, MAHER S
STREET ADDRESS 8318 VOLUSIA PLACE
CITY-ST-ZIP TEMPLE TERRACE FL 33637

TITLE D ☐ DELETE
NAME RASSAS, MOHAMMED S
STREET ADDRESS 8318 VOLUSIA PLACE
CITY-ST-ZIP TEMPLE TERRACE FL 33637

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

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
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

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 in an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REMAGED RASSAS
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/99

Date

(813) 979-1121

Daytime Phone #

CR2E034 (11/98)