

2000 UNIFORM BUSINESS REPORT (UBR)

4/

DOCUMENT # P99000073204

1. Entity Name

FAYEZ GAS MART INC

FILED
May 19, 2000 8:00 am
Secretary of State

04-25-2000 90122 014 ***150.00

Principal Place of Business

Mailing Address

910 N. MAIN ST.
 BLOUNTSTOWN FL 32424

910 N. MAIN ST.
 BLOUNTSTOWN FL 32424-1446

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3593524

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

AL-KHATEEB, MAHER
 2113 OLD BAINBRIDGE RD.
 TALLAHASSEE FL 32303

Name

MAHER A. KHATEEB

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

17881 N Main St.

City

Blountstown

FL

Zip Code

32424

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME MAHER AL-KHATEEB ☐ Delete
 STREET ADDRESS 17881 N Main St President
 CITY-ST-ZIP Blountstown, FL 32424

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME AIMAN KHALIL ☐ Delete
 STREET ADDRESS 2113 Bain Bridge Rd Vice
 CITY-ST-ZIP TALLAHASSEE FL 32303 President

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

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 CITY-ST-ZIP

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

MAHER A. KHATEEB **MAHER A. KHATEEB**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-18-00

CR2E034 (9/99)