FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

(5)

DOCUMENT #

1. Corporation Name

DIXIE HIGHWAY CLEANING CORPORATION								
rincipal Place of	Business	Mailing Address			* 12211012 111 01021 12111 17502 1			•-
6103 NW 7 ST MARGATE FL		6103 NW 7 STREET MARGATE FL 33063						
MANUALE FL	33003	********			3. Date Incorporated or Qualified 04/26/1991		ate of Last Report 04/24/1995	
Principal Place	of Business	2a. Mailing Address			4. FEI Number 65-0260634		⊢ +	Applied For
Suite, Apt. #, etc. City & State		26 Suite, Apt. #, etc. 27 City & State					\$8.75 Additional Fee Required \$5.00 May Be Added to Fees	
					5. Certificate of Status Desired			
					Election Campaign Financing Trust Fund Contribution			
7.	Country	Zip	Coun	iry	8. This corporation has liability for	r intangible to		
Zφ	25	29	30		Florida Statutes	es 🔲 No		
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New	Registered	Agent	-
			1	11 Name				
BAIG, NI	ZAKAT A.	82 Stre		Street Addre	idress (P.O. Box Number is Not Acceptable)			
6103 NORTH WEST 7TH STREET MARGATE FL 33063				33				
MANOAI	L 1 L 00003		1	34 City			85 Z	p Code
			l'	J- City		<u> </u>	_ `	
or registered familiar with,	the provisions of Sections 607.050 I agent, or both, in the State of Floi , and accept the obligations of, Sec gnature, typed or printed name of registered age	ction 607.0505, Florida Statute	S.	e-named corpor orporation's boar	d when reinstating)	DATE		
or registered familiar with, IGNATURE	agent, or both, in the State of Flor , and accept the obligations of, Sec gnature, typed or printed name of registered age OFFICERS AI	otion 607.0505, Florida Statute out and site if applicable (N	OTE: Registered /	gent signature require		DATE		DRS IN 12
or registered familiar with, IGNATURE	agent, or both, in the State of Flor, and accept the obligations of, Secondarium, typed or printed name of registered age OFFICERS AID BAIG, NIZAKAT A.	ont and sittle if applicable (N	S. OTE: Registered /	gent signature require	d when reinstating)	DATE	D DIRECTO	DRS IN 12
or registered familiar with, IGNATURE	agent, or both, in the State of Flor, and accept the obligations of, Secondarius, typed or printed name of registered age OFFICERS AI BAIG, NIZAKAT A. 6103 NW 7TH STREET	otion 607.0505, Florida Statute out and site if applicable (N	OTE: Registered // 13. 1. 1 TU 1.2 NAI 1.3 ST	gent squature require LE ME REET ADDRESS	d when reinstating)	DATE	D DIRECTO	DRS IN 12
or registered familiar with, GNATURE	agent, or both, in the State of Flor, and accept the obligations of, Secondarium, typed or printed name of registered age OFFICERS AID BAIG, NIZAKAT A.	rida, 300 Total ge was activities from 607, 0505, Florida Statute rit and site if applicable (ND DIRECTORS)	OTE: Registered J 13. 1.1 TI 1.2 NA 1.3 STI 1.4 CI	gent squature require LE ME NEET ADDRESS Y- S1-ZIP	d when reinstating)	DATE FFICERS ANI	D DIRECTO	DRS IN 12
or registered familiar with, IGNATURE	agent, or both, in the State of Flor, and accept the obligations of, Secondarius, typed or printed name of registered age OFFICERS AI BAIG, NIZAKAT A. 6103 NW 7TH STREET	otion 607.0505, Florida Statute out and site if applicable (N	OTE: Registered // 13. 1. 1 TU 1.2 NAI 1.3 ST	gent squature require LE ME LEET ADDRESS Y-ST-ZIP LE	d when reinstating)	DATE FFICERS ANI	D DIRECTO ☐ Change	DRS IN 12
or registerec familiar with, IGNATURE SI 2. TLE AME IPEET ADDRESS ITY-ST-ZIP ITE AME	agent, or both, in the State of Flor, and accept the obligations of, Secondarius, typed or printed name of registered age OFFICERS AI BAIG, NIZAKAT A. 6103 NW 7TH STREET	rida, 300 Total ge was activities from 607, 0505, Florida Statute rit and site if applicable (ND DIRECTORS)	OTE: Registered J 13. 1.1 TII 1.2 NAI 1.3 ST 1.4 CII 2.1 TI 2.2 NA	gent squature require LE ME LEET ADDRESS Y-ST-ZIP LE	d when reinstating)	DATE FFICERS ANI	D DIRECTO ☐ Change	
or registerec familiar with, IGNATURE 2. TLE AME IPEET ADDRESS ITY-ST-ZIP ITHE IMME TREET ADDRESS ITY-ST-ZIP ITHE ITHE ITHE ITHE ITHE ITHE ITHE ITHE ITHE	agent, or both, in the State of Flor, and accept the obligations of, Secondarius, typed or printed name of registered age OFFICERS AI BAIG, NIZAKAT A. 6103 NW 7TH STREET	nt and site if applicable ND DIRECTORS DELETE	OTE: Registered / 13. 1.1 TII 1.2 NAI 1.3 STI 1.4 CII 2.1 TII 2.2 NA 2.3 STI 2.4 CII	gent squature require LE ME LEET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP	d when reinstating)	DATE FFICERS ANI	D DIRECTO ☐ Change	DRS IN 12 ☐ Addition
or registerec familiar with, IGNATURE SI. 2. TLE AME IREET ADDRESS ITY-ST-ZIP TLE AME ITREET ADDRESS ITY-ST-ZIP ITREET ADDRESS ITY-ST-ZIP ITREET ADDRESS ITY-ST-ZIP	agent, or both, in the State of Flor, and accept the obligations of, Secondarius, typed or printed name of registered age OFFICERS AI BAIG, NIZAKAT A. 6103 NW 7TH STREET	rida, 300 Total ge was activities from 607, 0505, Florida Statute rit and site if applicable (ND DIRECTORS)	OTE: Registered / 13. 1.1 TII 1.2 NAI 1.3 STI 2.1 TI 2.2 NAI 2.3 STI	Gent agricitore required LE ME ME SEET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS	d when reinstating)	DATE FFICERS ANI	D DIRECTO Change	DRS IN 12 ☐ Additi
or registerec familiar with, IGNATURE SI. 2. THE AME SIREET ADDRESS SITY - ST - ZIP THE AME SITE ADDRESS SITY - ST - ZIP SITE SITE SITY - ST - ZIP SITY - ZIP	agent, or both, in the State of Flor, and accept the obligations of, Secondarius, typed or printed name of registered age OFFICERS AI BAIG, NIZAKAT A. 6103 NW 7TH STREET	nt and site if applicable ND DIRECTORS DELETE	S. TIS. 1.1 TII 1.2 NAI 1.3 STI 2.1 TII 2.2 NAI 2.3 STI 2.4 CII 3.1 TII 3.2 NAI 3.2 NAI 3.2 NAI 3.3 NAI 3.4 CII 3.2 NAI 3.2 NAI 3.3 NAI 3.4 CII	Gent agricitore required LE ME ME SEET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS	d when reinstating)	DATE FFICERS ANI	D DIRECTO Change	DRS IN 12 ☐ Addition
or registerec familiar with, iGNATURE	agent, or both, in the State of Flor, and accept the obligations of, Secondarius, typed or printed name of registered age OFFICERS AI BAIG, NIZAKAT A. 6103 NW 7TH STREET	India 18 de l'Ordon Statute rit and situ if applicable (N) ND DIRECTORS DELETE DELETE	OTI: Registered / 13. 1.1 TII 1.2 NAI 1.3 STI 2.1 TI 2.2 NAI 2.3 STI 2.4 CII 3.1 TI 3.2 NAI 3.3 ST 3.4 CII 3.4 CII	Gent signature required LE ME ME ME ME ME ME ME ME ME	d when reinstating)	DATE FFICERS ANI	D DIRECTO Change	DRS IN 12 Addition Addition Addition
or registerec familiar with, IIGNATURE 2. TILE AME IPRET ADDRESS ITY-ST-ZIP ITLE ITREET ADDRESS ITY-ST-ZIP ITLE IAME ITREET ADDRESS ITY-ST-ZIP ITLE IAME ITREET ADDRESS ITY-ST-ZIP ITLE IAME ITREET ADDRESS ITY-ST-ZIP ITLE ITTEE	agent, or both, in the State of Flor, and accept the obligations of, Secondarius, typed or printed name of registered age OFFICERS AI BAIG, NIZAKAT A. 6103 NW 7TH STREET	nt and site if applicable ND DIRECTORS DELETE	S. S	Gent signature required LE ME ME ME ME ME ME ME ME ME	d when reinstating)	DATE FFICERS ANI	D DIRECTO Change Change	DRS IN 12 Addition Addition Addition
or registerec familiar with, IGNATURE 2. TLE AME IPEET ADDRESS ITY-ST-ZIP ITLE IMME ITREET ADDRESS ITY-ST-ZIP ITLE IMME	agent, or both, in the State of Flor, and accept the obligations of, Secondarius, typed or printed name of registered age OFFICERS AI BAIG, NIZAKAT A. 6103 NW 7TH STREET	India 18 de l'Ordon Statute rit and situ if applicable (N) ND DIRECTORS DELETE DELETE	S	Gent signature required LE ME ME ME ME ME ME ME ME ME	d when reinstating)	DATE FFICERS ANI	D DIRECTO Change Change	DRS IN 12 Addition Addition Addition
or registerec familiar with, IGNATURE 2. TILE AME IFFEET ADDRESS ITY-ST-ZIP TILE ITHEET ADDRESS ITY-ST-ZIP ITHEET ADDRESS ITTY-ST-ZIP ITHEET ADDRESS ITTY-ST-ZIP ITHEET ADDRESS ITTY-ST-ZIP ITHEET ADDRESS	agent, or both, in the State of Flor, and accept the obligations of, Secondarius, typed or printed name of registered age OFFICERS AI BAIG, NIZAKAT A. 6103 NW 7TH STREET	Triad Stati Oral Statute ont and the if applicable (N ND DIRECTORS) DELETE DELETE DELETE	S. OTE: Registered / 13. 1. 1 TII 1.2 NAI 1.3 STF 1.4 CII 2.1 TI 2.2 NAI 2.3 STI 2.4 CII 3.1 TII 3.2 NAI 3.3 ST 4.4 CII 4.2 NAI 4.3 ST 4.4 CII 4.4 CII 4.5 NAI 4.5 ST 4.4 CII 4.4 CII 4.5 NAI 4.5 ST	Gent signature required LE ME ME ME ME ME ME ME ME ME	d when reinstating)	DATE FFICERS ANI	D DIRECTO Change Change Charge	ORS IN 12 Additi
or registerec familiar with, IGNATURE 2. TLE AME IFFET ADDRESS ITY-ST-ZIP ITLE IAME ITFEET ADDRESS ITY-ST-ZIP ITTE ITTE ITTE ITTE ITTE ITTE ITTE IT	agent, or both, in the State of Flor, and accept the obligations of, Secondarius, typed or printed name of registered age OFFICERS AI BAIG, NIZAKAT A. 6103 NW 7TH STREET	India 18 de l'Ordon Statute rit and situ if applicable (N) ND DIRECTORS DELETE DELETE	S. DTE: Registered / 13. 1. 1 TII 1.2 NAI 1.3 STF 1.4 CII 2.1 TII 2.2 NAI 2.3 STF 2.4 CII 3.1 TII 3.2 NAI 3.3 STF 3.4 CII 4.1 TII 4.2 NAI 4.3 STF 4.4 CII 5.1 TII 5.1 TII 5.1 TII 5.1 TII 1.2 NAI 1.3 STF 1.4 CII 1.4 CII 1.5 TII 1	Gent signature required LE ME MEET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP TLE ME REET ADDRESS	d when reinstating)	DATE FFICERS ANI	D DIRECTO Change Change	ORS IN 12 Addition Addition Addition
or registerec familiar with, IGNATURE 2. ILLE AME IFFET ADDRESS ITY-ST-ZIP ILLE AME ITHEET ADDRESS ITY-ST-ZIP ILLE ITHEET ADDRESS ITY-ST-ZIP	agent, or both, in the State of Flor, and accept the obligations of, Secondarius, typed or printed name of registered age OFFICERS AI BAIG, NIZAKAT A. 6103 NW 7TH STREET	Triad Stati Oral Statute ont and the if applicable (N ND DIRECTORS) DELETE DELETE DELETE	S. T13. 1.1 TII 1.2 NAI 1.3 STI 2.1 TII 2.2 NAI 2.3 STI 2.4 CII 3.1 TII 3.2 NAI 3.3 ST 4.4 CII 4.1 TII 4.2 NAI 4.3 ST 4.4 CII 5.1 TI 5.2 NAI	Gent signature required LE ME MEET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP TLE ME REET ADDRESS	d when reinstating)	DATE FFICERS ANI	D DIRECTO Change Change Charge	ORS IN 12 Addition Addition Addition
or registerec familiar with, IGNATURE 2. TLE AME IREET ADDRESS ITY-ST-ZIP ITLE IMME ITREET ADDRESS ITHEET ADDRESS IT	agent, or both, in the State of Flor, and accept the obligations of, Secondarius, typed or printed name of registered age OFFICERS AI BAIG, NIZAKAT A. 6103 NW 7TH STREET	Total Stati of applicable	S. OTE: Registered / 13. 1.1 TII 1.2 NAI 1.3 STI 2.1 TII 2.2 NAI 2.3 STI 2.4 CII 3.1 TII 3.2 NAI 3.3 ST 4.4 CII 4.2 N/ 4.3 ST 4.4 CII 5.1 T 5.2 N/ 5.3 ST 5.4 CII 5.5 ST	Gent squature required LE ME ME ME ME ME ME ME ME ME	d when reinstating)	DATE FFICERS ANI	D DIRECTO Change Change Charge Charge	PRS IN 12 Addition Addition Addition Addition
or registerec familiar with, SIGNATURE 2. ITLE IAME ITREET ADDRESS ITLY-ST-ZIP ITLE IAME ITREET ADDRESS ITLY-ST-ZIP ITLE IAME ITTLE IAME IAME IAME IAME IAME IAME IAME IAM	agent, or both, in the State of Flor, and accept the obligations of, Secondarius, typed or printed name of registered age OFFICERS AI BAIG, NIZAKAT A. 6103 NW 7TH STREET	Triad Stati Oral Statute ont and the if applicable (N ND DIRECTORS) DELETE DELETE DELETE	S. T13. 1.1 TII 1.2 NAI 1.3 ST6 1.4 CII 2.2 TII 2.2 NAI 2.3 STI 2.4 CII 3.1 TII 3.2 NAI 4.1 TII 4.2 NAI 4.3 ST 4.1 TII 5.2 NAI 5.3 ST 5.4 CII 6.1 TI	Gent squature required LE ME ME ME ME ME ME ME ME REET ADDRESS Y-ST-ZIP FLE ME REET ADDRESS Y-ST-ZIP TLE ME REET ADDRESS Y-ST-ZIP TLE ME REET ADDRESS Y-ST-ZIP TLE ME REET ADDRESS IY-ST-ZIP TLE ME REET ADDRESS IY-ST-ZIP TLE ME REET ADDRESS IY-ST-ZIP TLE ME REET ADDRESS	d when reinstating)	DATE FFICERS ANI	D DIRECTO Change Change Charge	PRS IN 12 Addition Addition Addition Addition
or registered familiar with,	agent, or both, in the State of Flor, and accept the obligations of, Secondarius, typed or printed name of registered age OFFICERS AI BAIG, NIZAKAT A. 6103 NW 7TH STREET	Total Stati of applicable	S. OTE: Registered / 13. 1.1 TII 1.2 NAI 1.3 ST6 1.4 CII 2.2 TII 2.2 NAI 2.3 STI 2.4 CII 3.1 TII 3.2 NAI 4.1 TII 4.2 N/ 4.3 STI 4.4 CII 5.1 T 5.2 N/ 5.3 ST 5.4 CI 6.1 T 6.2 N	Gent squature required LE ME ME ME ME ME ME ME ME REET ADDRESS Y-ST-ZIP FLE ME REET ADDRESS Y-ST-ZIP TLE ME REET ADDRESS Y-ST-ZIP TLE ME REET ADDRESS Y-ST-ZIP TLE ME REET ADDRESS IY-ST-ZIP TLE ME REET ADDRESS IY-ST-ZIP TLE ME REET ADDRESS IY-ST-ZIP TLE ME REET ADDRESS	d when reinstating)	DATE FFICERS ANI	D DIRECTO Change Change Charge Charge	PRS IN 12 Addition Addition Addition Addition

SIGNATURE: