05-06-1999 90077 046 ***150.00

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Zip Code

i 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

DOCUMENT # \$49759

1. Corporation Name

DINE HILLS VARIETY DISCOUNT INC

Mailing Address				AIĞIL BIRSI BIBIS BIBIS BIBIS IGDI
723 NORTH PINE HILLS ROAD ORLANDO FL 32808 723 NORTH PINE HILLS ROAD ORLANDO FL 32808			DO NOT WRITE IN THIS SPACE	
			3. Date Incorporated or Qualifed 05/03/1991	
2a. Mailing Address			4. FEI Number	Applied For
26			59-3059990	Not Applicable
Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 Additional Fee Required
City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
	Country		This corporation owes the current year In Personal Property Tax.	ntangible □ Yes X No
irrent Registered Agent			10. Name and Address of New Registered	Agent
	81			
	723 NORTH PINE HILLS ROAD ORLANDO FL 32808 2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip C	723 NORTH PINE HILLS ROAD ORLANDO FL 32808 2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29 30 Irrent Registered Agent 81	723 NORTH PINE HILLS ROAD ORLANDO FL 32808 2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29 30 Irrent Registered Agent 81 Name	Mailing Address 723 NORTH PINE HILLS ROAD ORLANDO FL 32808 DO NOT WRITE IN THIS 3. Date Incorporated or Qualifed 05/03/1991 4. FEI Number 59-3059990 Suite, Apt. #, etc. 5. Certificate of Status Desired City & State 28 City & State 29 Country 29 Country 30 Responsible Financing Trust Fund Contribution Responsible Financing Trust Fund Contribution Responsible Financing Personal Property Tax. 10. Name and Address of New Registered 81 Name 82 Street Address (P.O. Box Number is Not Acceptable)

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.

City

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstalling) DATE								
Signature, typed of printed name of registered agent and sue in approache (Inc.). Registered Agent Signature requires Wind Fundamental Signature (Inc.).								
12.	OFFICERS AND DIRECTORS	13.						
TITLE	P □ DELETE	1.1 TITLE	Change	Addition				
NAME	GUYAMEHAND, PHEKOO	1.2 NAME						
STREET ADDRESS	104-63 120TH ST	1.3 STREET ADDRESS						
CITY-ST-ZIP	RICHMONDHILL NY	1.4 CITY-ST-ZIP						
TITLE	ST □ DELETE	2.1 TITLE	☐ Change	Addition				
NAME	SINGH, MAHENDRA	2.2 NAME						
STREET ADDRESS	723 N. PINEHILL RD	2.3 STREET ADDRESS						
CITY-ST-ZIP	ORLANDO FL	2. 4 CITY-ST-ZIP						
TITLE	D DELETE	3.1 TITLE	☐ Change	Addition				
NAME	BALJIT, SINGH	3.2 NAME						
STREET ADDRESS	15528 CHARTER OAKS	3.3 STREET ADDRESS						
CITY-ST-ZIP	CLERMONT FL 34771	3.4. CITY-ST-ZIP						
TITLE	DELETE	4.1 TITLE	☐ Change	Addition				
NAME		4.2 NAME						
STREET ADDRESS		4.3 STREET ADDRESS						
CITY-ST-ZIP		4.4 CITY-ST-ZIP						
TITLE	☐ DELETE	51 TITLE	☐ Change	Addition				
NAME		5.2 NAME						
STREET ADDRESS		5.3 STREET ADDRESS						
CITY-ST-ZIP		5.4 CITY-ST-ZIP						
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐	Addition				
NAME		6.2 NAME						
STREET ADDRESS		6.3 STREET ADDRESS						
CITY-ST-ZIP		6.4 CfTY-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, with all other like empowered.