## **2003 FOR PROFIT CORPORATION**

## FILED May 05, 2003 8:00 am Secretary of State **UNIFORM BUSINESS REPORT (UBR** S87988 DOCUMENT # 1. Entity Name 05-05-2003 91453 023 \*\*\*150.00 DINAJ QUIK MART, INC. Principal Place of Business Mailing Address 7791 BISCAYNE BLVD 1525 NW 3RD ST MIAMI FL 33186 #14 DEERFIELD BEACH FL 33442 2. Principal Place of Business 3. Mailing Address 7791 Biscayne Blud Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State Applied For 4. FEI Number 65-0292397 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Dade. Fee Required 6. Name and Address of Current Registered Agent 7.-Name and Address of New Registered Agent-MANZURUL, ISLAM Street Address (P.O. Box Number is Not Acceptable) 12693 TORBY DR. **BOCA RATON FL 33428** City Zip Code 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. TITI F ☐ Delete TITLE Change MOHAMMED DINAJ KHAN MOHAMMED DINAJ KHAN NAME NAME LAREINA Rd. 750 NE 64TH ST - APT # P.H. B-7 STREET ADDRESS STREET ADDRESS 10245 **BOCA RATON FL 33428** CITY-ST-ZIP DELRAY BEACH, FL. 334246 CITY-ST-7IP Change Addition TITLE ☐ Delete TITLE MANZURUL ISLAM NAME MANSURUL, ISLAM NAME STREET ADDRESS 12693 TORBAY DR STREET ADDRESS 12693 Turbay DR. CITY-ST-ZIP **BOCA RATON FL** CITY-ST-ZIP F1- 33428 BOUA RATON, **Change** ☐ Addition TITLE ☐ Delete TITLE DAUM REZA NAME reza, dalim NAME 750 NG GYTH ST PH B-7 12693 TORBAY DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-7IP BOCA RATON FL 33428 CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. 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 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 10 or Block 11 if of the corporation or the receiphanged, or on an attachmen address, with all other

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

Change

☐ Addition