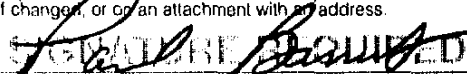


FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
May 05 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P12336 (4) 1. Corporation Name BILL'S DOLLAR STORES INC.			
Principal Place of Business 3800 I-55 NORTH P.O. BOX 9407 JACKSON MS 39286		Mailing Address 3800 I-55 NORTH P.O. BOX 9407 JACKSON MS 39286-9407	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	
3. Date Incorporated or Qualified 12/02/1986		3a. Date of Last Report 05/01/1996	
4. FEI Number 64-0736093		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	
7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No			
9. Name and Address of Current Registered Agent UNITED STATES CORPORATION COMPANY 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301		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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PC	1.1 TITLE	☐ Change ☐ Addition
NAME	ROEHM, MACDONELL JR.	1.2 NAME	
STREET ADDRESS	124 COACHMAN'S ROAD	1.3 STREET ADDRESS	
CITY - ST - ZIP	MADISON MS	1.4 CITY - ST - ZIP	
TITLE	VST	2.1 TITLE	☐ Change ☐ Addition
NAME	BARRETT, PAUL M. (ASST)	2.2 NAME	
STREET ADDRESS	400 AUDUBON POINT	2.3 STREET ADDRESS	
CITY - ST - ZIP	BRANDON MS	2.4 CITY - ST - ZIP	
TITLE	V	3.1 TITLE	☐ Change ☐ Addition
NAME	WILLIAMS, ALAN RAY	3.2 NAME	
STREET ADDRESS	531 CAMELIA TRAIL	3.3 STREET ADDRESS	
CITY - ST - ZIP	BRANDON MS	3.4 CITY - ST - ZIP	
TITLE	V	4.1 TITLE	☐ Change ☒ Addition
NAME	MILEWICZ, LEO	4.2 NAME	
STREET ADDRESS	6295 OLD CANTON RD. APT #9A	4.3 STREET ADDRESS	
CITY - ST - ZIP	JACKSON MS	4.4 CITY - ST - ZIP	
TITLE	V	5.1 TITLE	☐ Change ☒ Addition
NAME	PELLETIER, REGINALD	5.2 NAME	
STREET ADDRESS	1415 E. NORTHSIDE DR.	5.3 STREET ADDRESS	
CITY - ST - ZIP	JACKSON MS	5.4 CITY - ST - ZIP	
TITLE	ASAT	6.1 TITLE	☐ Change ☐ Addition
NAME	WEEMS, WALTER	6.2 NAME	
STREET ADDRESS	2212 SHEFFIELD DR	6.3 STREET ADDRESS	
CITY - ST - ZIP	JACKSON MS	6.4 CITY - ST - ZIP	
14. I do 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.			
SIGNATURE: 		4/22/97 601-987-0604	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

CR2E034 (9/96)