

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000074996  
1. Entity Name

VICTOR SUPER DOLLAR STORE #2, INC.

FILED

01 JUN 21 PM 3:48

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address  
2607W. Flagler Street 10701 S.W. 46 St.  
Miami Fl 33135 Miami Fl 33165

2. Principal Place of Business 3. Mailing Address  
Suite, Apt. #, etc. Suite, Apt. #, etc.  
2607 W. Flagler Street

City & State City & State 4. FEI Number Applied For  
Miami Fl 65-1036979 Not Applicable  
Zip Country Zip Country 5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required  
33135 USA

6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent  
Mirtha Martinez Name  
10701 S.W. 46 Street Silvio Zamora  
Miami Fl 33165 Street Address (P.O. Box Number is Not Acceptable)  
3405 W. 75 Place  
City Miami FL Zip Code 33018

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]* DATE 6-13-2007  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25  
After September 13, 2000 min. will be \$236.25

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	President	<input checked="" type="checkbox"/> Delete	TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Mirtha Martinez		NAME	Silvio Zamora	
STREET ADDRESS	10701 S.W. 46 Street		STREET ADDRESS	3405 W. 75 Place	
CITY-ST-ZIP	Miami Fl 33165		CITY-ST-ZIP	Miami Fl 33018	
TITLE	Vice President	<input checked="" type="checkbox"/> Delete	TITLE	Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Vicente Couto		NAME	Rogelia Zamora	
STREET ADDRESS	10701 S.W. 46 Street		STREET ADDRESS	3405 W. 75 Place	
CITY-ST-ZIP	Miami Fl 33165		CITY-ST-ZIP	Miami Fl 33018	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Silvio Zamora, Pres. DATE: 6-13-2007 DAYTIME PHONE: 305-557-2868  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR