## 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## Apr 08, 2004 8:00 am Secretary of State DOCUMENT # P01000021145 1. Entity Name 04-08-2004 90045 045 \*\*\*150.00 BANDEALI ENTERPRISE, INC. Principal Place of Business Mailing Address BANDEALI ENTERPRISE INC., D/B/A DOLLA MART PLUS, 1899 N. PINE ISLAND RD PLANTATION FL 33322 BANDEALI ENTERPRISE INC., D/B/A DOLLA MART PLUS, 1899 N. PINE ISLAND RD 54028706 PLANTATION FL 33322 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) Applied For City & State City & State 4. FEI Number 65-1080970 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required .6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GILLANI, ABDUL-AZIZ-Street Address (P.O. Box Number is Not Acceptable) C/O DOLLAR MART PLUS 1899 N. PINE ISLAND RD. PLANTATION FL 33322 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, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. DVD TITLE ☐ Delete TITLE Change | ☐ Addition GILLANI, ABDUL AZIZ NAME NAME 1899 N. PINE ISLAND RD. STREET ADDRESS STREET ADDRESS PLANTATION FL 33322 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change Change ☐ Addition TITLE TITLE BANDEALI, YASMIN B NAME NAME 15170 N.W. 6 COURT STREET ADDRESS STREET ADDRESS PEMBROKE PINES FL 33028 CITY-ST-ZIP CITY-ST-ZIP للسبار المتعلق بالتساسات HITLE Delete TITLE Change Addition NAME BANDEALI, BADRUDDIN A NAME STREET ADDRESS 15170 N.W. 6 COURT ---STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP PEMBROKE PINES FL 33028 ☐ Delete □ Change TITLE TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITEE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change Addition 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

changed, or on an attachment with an address, with all other like empowered. **SIGNATURE:** 

BADRUDDIN A SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BANDEAU

Daytime Phone #

FILED