2005 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 21, 2005 8:00 am **Secretary of State DOCUMENT # P01000028188** 01-21-2005 90084 050 ***150.00 THE ROSE DOLLAR STORE INC. Principal Place of Business Mailing Address 11339 WEST FLAGLER STREET 11339 WEST FLAGLER STREET 50005290 MIAMI, FL 33172 MIAMI, FL 33172 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01062005 CR2E034 (10/03) Chg-P City & State City & State Applied For 4. FEI Number 65-1083914 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent TRUJILLO, LESTHER 7420 WEST 20 AVE, #446 Street Address (P.O. Box Number is Not Acceptable) HIALEAH, FL 33016 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 Rorida. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. TITLE Delete TITLE Change Addition TRUJILLO, LESTHER NAME NAME STREET ADDRESS 2847 WEST 71ST PLACE STREET ADDRESS CITY-ST-ZIP HIALEAH, FL 33018 CITY-ST-ZIP VPTD ☐ Delete TITLE Change Addition TRUJILLO, LEIDY D NAME NAME STREET ADDRESS 2847 WEST 71ST PLACE STREET ADDRESS CITY-ST-ZIP HIALEAH, FL 33018 CITY+ST-ZIP [] Change Delete Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP Delete TITLE f"| Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-71P CITY-ST-ZIP []] Delete TITLE TITLE [1] Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP

I hereby certity 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: ___

FILED

Daytime Phone #

2005 FOR PROFIT CORPORATION ANNUAL REPORT

_	ANNUA	REPORT	11014	ATTACHM	=NT	
1. Entity Nam	MENT # P0100002 SE DOLLAR STORE INC	8188		.	05290	
Principal Place of Business 11339 WEST FLAGLER STREET MIAMI, FL 33172		Mailing Address 11339 WEST FLAGLER STREET MIAMI, FL 33172				
2. Principal Place of Business		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01062005 Chg-P	CR2E034 (10/03)	
City & State		City & State		4. FEI Number 65-1083914	Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desire	d : \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			Name	7. Name and Address of New	w Registered Agent	
TRUJILLO, LESTHER 7420 WEST 20 AVE. #446 HIALEAH, FL 33016				Street Address (P.O. Box Number is Not Acceptable)		
			City	City FL Zip Code		
	named entity submits this statement fi tions of registered agent. Signature, typed or printed name of registered agen		registered office or regist		Florida. I am familiar with, and accept DATE	
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550	9. Election Campai .00 Trust Fund Cont		5.00 May Be dded to Fees		
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGES TO C	OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TRUJILLO, LESTHER 2847 WEST 71ST PLACE HIALEAH, FL 33018	☐ Detete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY- ST-ZIP	VPTD TRUJILLO, LEIDY D 2847 WEST 71ST PLACE HIALEAH, FL 33018	☐ Delcte	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	TITLE NAME	<u>-</u>	Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		[]] Delete	TITLE NAME STREET ADDRESS CITY- ST-ZIP		[] Change [] Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		C) Defete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
indicated of the cor	certify that the information supplied will fon this report or supplemental report poration or the receiver or trustee emp , or on an attachment with an address,	is true and accurate and that no powered to execute this report	ny signature shall have th as required by Chapter 6	e same legal effect as if made und	es. I further certify that the information fer oath; that I am an officer or director ame appears in Block 10 or Block 11 if	

Daytime Phone #