

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000060276

**FILED**  
**Jan 16, 2010**  
**Secretary of State**

**Entity Name:** MR. 99 CENTS II, INC.

**Current Principal Place of Business:**

1811 LAKE TRAFFORD RD  
INMOKALEE, FL 34142

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 770549  
NAPLES, FL 34107

**New Mailing Address:**

**FEI Number:** 65-1115610

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HASSAM, NIVIAN  
3605 SW 139TH AVE  
MIAMI, FL 33175 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** DP  
**Name:** HASSAM, DIAMIL  
**Address:** 1243 FRIENDSHIP WAY  
**City-St-Zip:** IMMOKALEE, FL 34142

**Title:** VP  
**Name:** HASSAM, NIVIAN  
**Address:** 1243 FRIENDSHIP WAY  
**City-St-Zip:** IMMOKALEE, FL 34142

**Title:** ST  
**Name:** HASSAM, JANETH  
**Address:** 1243 FRIENDSHIP WAY  
**City-St-Zip:** IMMOKALEE, FL 34142

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

**SIGNATURE:** NIVIAN HASSAM

VP

01/16/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date