2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # P01000082324

1. Entity Name

MULTI PRODUCTS DOLLAR STORE, INC.



FILED Apr 09, 2004 8:00 am Secretary of State

04-09-2004 90074 002 ***150.00

					GO WE THAT	1				
Principal Place of Business Mailing Address						7				
8074 NW 10			8074 NW 103RD ST, STE 8 & 9							
HIALEAH G	ARDENS FL	33016	HIALEAH GARDENS FL 33016				. *			
							:			
2. Principal P	lace of Busine	ess	3. Mailing Address							
Suite, Apt.	# etc		Suite, Apt. #, etc.			-				
Suite, Apr.	#, C (C.		Julie, Apr. #, etc.				MOORE CR2E034 (11/03)			
City & State	е		City & State			4. 9	FEI Number 65-1131294	Ар	plied For	
7:- Country			Zip Country						t Applicable	
Zip Country			Country			5. (5. Certificate of Status Desired			
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent				
			Name							
VAL	DES, CAR	RMEN DDD CT CTE 9 8 0			Street Address (P.O. Box Number is Not Acceptable)					
8074 NW 103RD ST, STE 8 & 9 HIALEAH GARDENS FL 33016										
								_		
				City			FL	Zip Code	9	
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.										
ine obligat	tions of registe	ereo agent.	•							
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
STORESTERNAL TO ANY	prose Supposituding Street	TO COURT CONSTRUCTION TO CONTROL SAME.	and the mappingable. (NC	71E. Hegistere	au Agenii signature redui	red when re	enstainty DATE			
The state of the s	the same of the same of the same of	! FEE IS \$150.00 4 Fee will be \$550.00					9. Election Campaign Financing		O May Be	
		Florida Department o	l State				Trust Fund Contribution.	Added	to Fees	
10.	<u> </u>	OFFICERS AND	DIRECTORS	11.		AÈ	DDITIONS/CHANGES TO OFFICERS AND D	DIRECTORS	S IN 11	
TITLE	PD		☐ Delete	TITL	E			☐ Change	☐ Addition	
NAME	VALDES, C		NAM CTDE		1E EET ADDRESS					
CITY-ST-ZIP	STREET ADDRESS 8074 NW 103RD ST, STE 8 & 9 HIALEAH GARDENS FL 33016		1		Y-ST-ZIP					
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CITY-ST-ZIP	andifu that the	information availant with	this filing does not available		r-ST-ZIP	Contine	. 119 07(3Vi). Florida Statutes I further certif	fu that that	oformation	

c. Finereby cerrity that the information supplied with this friends does not quality 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.

Carmer

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/30/04

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