## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## ANNUAL REPORT DOCUMENT # P01000102375

1. Entity Name

DOLLAR STORE OF ORLANDO, INC.



Principal Place of Business

1520 W. VINE STREET KISSIMMEE, FL 34741-4002 Mailing Address

1520 W. VINE STREET KISSIMMEE, FL 34741-4002 FILED
Apr 02, 2007 08:00 AM
Secretary of State



## DO NOT WRITE IN THIS SPACE

 03152007
 No Chg-P
 CR2E034 (11/05)

 4. FEI Number
 Applied For S9-3751739

 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MOHAMED, CHATOUI 2936 LAZLO LANE ORLANDO, FL 32837

## DO NOT WRITE IN THIS SPACE

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	applicable (NOTE Registered A	igent signature	required when reinstating)	DAYE
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	Election Campaign Finance     Trust Fund Contribution.	ing	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIREC	TORS			
IIILE P NAME CHATOUI, MOHAMED STREET ADDRESS 2936 LAZLO LANE CITY-ST-ZIP ORLANDO, FL 328377310				
IIILE NAME STREET ADDRESS CITY-S1-ZIP				U00000565028 04/06/07-80055-024 150.0
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			łN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
NAME STREET ADDRESS CITY-ST-2IP  12. I hereby certify that the information supplied with this fill				

12. I nereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 attackment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-30-07

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Daytme Phone #