

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000034371

FILED  
Apr 30, 2009  
Secretary of State

**Entity Name:** TRUE DOLLAR AND LINEN STORE, INC.

**Current Principal Place of Business:**

1391 NW 36 ST  
MIAMI, FL 33142

**New Principal Place of Business:**

**Current Mailing Address:**

1391 NW 36 ST  
MIAMI, FL 33142

**New Mailing Address:**

**FEI Number:** 37-1427170

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ADBELGHANI, MOHAMMAD  
21100 NE 3RD AVE  
NORTH MIAMI, FL 33179 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:** PST ( ) Delete  
**Name:** ADBELGHANI, MOHAMMAD  
**Address:** 21100 NW 3RD AVE  
**City-St-Zip:** N MIAMI, FL 33179

**Title:** VP ( ) Delete  
**Name:** ABDEL GHANI, NADUEH M  
**Address:** 21100 NE 3RD AVE  
**City-St-Zip:** N MIAMI, FL 33179

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

**SIGNATURE:** MOHAMMAD ABDELGHANI

PD

04/30/2009

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

\_\_\_\_\_  
Date