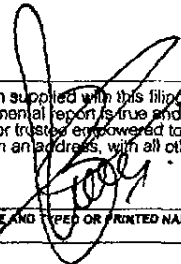


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 16, 2006 08:00 AM
Secretary of State

DOCUMENT # P02000035759 1. Entity Name A 1 A DISCOUNT STORES, INC.		
Principal Place of Business 1716 OCEANSHORE BLVD ORMOND BEACH, FL 32176	Mailing Address 1716 OCEANSHORE BLVD ORMOND BEACH, FL 32176	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent POLTA, EUGENE K 1806 VIA CAPRI MERRITT ISLAND, FL 32952		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 _____ Signature, typed or printed name of registered agent and file if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD BHARUCHA, MEHUL 180 HIGHWAY A1A SATELLITE BEACH, FL 32937	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD BHARUCHA, MEHUL 180 HIGHWAY A1A SATELLITE BEACH, FL 32937	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD GANDHI, DINESH C 595 NEWPORT DRIVE INDIALANTIC, FL 32903	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD GANDHI, MANHAR C 707 LUND CIRCLE MELBOURNE, FL 32901	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
12. I hereby 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 attachment with an address, with all other like empowered.		
SIGNATURE:  MANNIE BHARUCHA 03/10/06 321 693 346 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #		



03082006 No Chg-P CRZE034 (11/05)

4. FEI Number **04-3649559** Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

000000489353
03/25/06-80025-019 150.00

**DO NOT WRITE
IN THIS SPACE**