


# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P02000092395		
1. Entity Name TATYS 99 CENT DISCOUNT PLUS, INC		

Principal Place of Business 2050 WEST 56 ST #17 HIALEAH GARDEN, FL 33016	Mailing Address 2050 WEST 56 ST #17 HIALEAH GARDEN, FL 33016
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

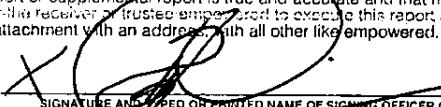
6. Name and Address of Current Registered Agent	
RODRIGUEZ, MARIA H 8775 PARK BLVD. #204 BUILDING B MIAMI, FL 33172	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

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	DATE

FILE NOW!!! FEE IS \$300.00		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
GUEVARA, RENE VICTORIA			
1890 WEST 56 STREET, APT 1215			
HIALEAH, FL 33012			

12. I hereby certify that the information supplied with this filing does not qualify 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.	
SIGNATURE: 	Date: 04/20/05

FILED  
05 APR -6 AM 7:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

REINSTATEMENT



03152005 REIN-P CR2E098 (6/04)

4. FEI Number 32-0028392 Applied For Not Applicable

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

FL Zip Code

700051350857  
04/20/05--01011--020 \*\*300.00

Daytime Phone #