

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 15, 2003 8:00 am
Secretary of State

01-15-2003 90215 038 ***150.00

DOCUMENT # P02000095528

1. Entity Name

UNIVERSAL DOLLAR DISCOUNT, INC.



Principal Place of Business

8810 NW 189 TERRACE

MIAMI LAKES FL 33015

Mailing Address

8810 NW 189 TERRACE

MIAMI LAKES FL 33015

2. Principal Place of Business

150 E. 1 AVE.

3. Mailing Address

Suite, Apt. #, etc.

Suite 101

Suite, Apt. #, etc.

City & State

Miami, FL.

City & State

Zip

33010

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

13-4214152

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PAULINO, MARIA E

8810 NW 189 TERRACE

MIAMI LAKES FL 33015

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PVP
NAME PAULINO, MARIA E STD ☐ Delete
STREET ADDRESS 8810 NW 189 TERRACE
CITY-ST-ZIP MIAMI LAKES FL 33015

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PVP
NAME PAULINO, MARIA E. ☒ Change ☐ Addition
STREET ADDRESS 8810 NW 189 TERRACE
CITY-ST-ZIP MIAMI LAKES, FL. 33015

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Signature of Maria E. Paulino
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/10/2003 (305) 805-8818
Daytime Phone #

CR2E034 (10/02)