## 2006 FOR PROFIT CORPORATION

## **FILED** Apr 04, 2006 8:00 am Secretary of State **ANNUAL REPORT (AR) DOCUMENT # P03000008774** 1. Entity Name 04-04-2006 90141 012 \*\*\*158.75 THE DOLLAR PLACE, INC. Principal Place of Business Mailing Address SIMMS CR PLAZA, 1695 W. INDIANTOWN RD SIMMS CR PLAZA, 1695 W. INDIANTOWN RD JUPITER FL 33458 JUPITER FL 33458 US US 2. Principal Place of Business 3. Mailing Address Suite. Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) City & State City & State 4. FEI Number Applied For 13-4239836 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name **ACTIVE FILINGS LLC** Street Address (P.O. Box Number is Not Acceptable) 10651 NE 11TH COURT MIAMI SHORES FL 33138 City 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 prioled name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstativa) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Change Addition THILE ☐ Delete TITLE NAME BARON, PHOEBE H NAME STREET ADDRESS 10600 S. OCEAN BOULEVARD STREET ADDRESS CITY-ST-ZIP JENSEN BEACH FL 34957 CITY-ST-ZIP TITLE ☐ Delete TITLE 259 Ridge Rd Jupiler Fl Addition NAME NAPLES, AMY B STREET ADDRESS 10645 164TH COURT NORTH STREET ADDRESS 33477 CITY-ST-ZIP JUPITER FL 33478 CITY-ST-7IP THEF Delete TITLE Addition NAME MALS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZtP Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition

12. Thereby certify that the information supplied with this fling does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is grue 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 bustee employered 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 five empowered.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-7IP