2004 FOR PROFIT CORPORATION ANNUAL REPORT

Jul 09, 2004 8:00 am Secretary of State DOCUMENT # P03000013976 1. Entity Name 07-09-2004 90007 041 ***150 00 GRENY DOLLAR DISCOUNT, CORP. Principal Place of Business Mailing Address 5412 SW 127TH WAY 5412 SW 127TH WAY OANDININ MIAMI, FL 33175 MIAMI, FL 33175 2. Principal Place of Business 3. Mailing Address 1398 W Flagler St. 11398 W Flagler Suite, Apt. #, etc. Suite, Apt. #, etc. 07012004 CR2E034 (10/03) Cha-P 701 井 **井 105** 4. FEI Number 05 055 1799 Applied For City & State City & State Wiam: FI Wiami Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FLORES, OMAR Street Address (P.O. Box Number is Not Acceptable) 5412 SW 127TH WAY MIAMI, FL 33175 🛴 🌬 Zip Code 7 Y iam 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 18 \$150.00 9. Election Campaign Financing \$5.00 May Be in accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. corporation did not receive the prior notice. Added to Fees Due by September 8, 2004 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Delete ☐ Addition Change TITLE TIRE NAME FLORES, OMAR NAME 11398 w flagler st #105 5412 SW 127TH WAY STREET ADDRESS STREET ADDRESS MIAMI, FL 33175 CITY-ST-ZIP CITY-ST-ZIP Change TITLE ☐ Delete TITLE ■ Addition FLORES, MARLENE NAME NAME 11398 W Flag IN St. #105 5412 SW 127TH WAY STREET ADDRESS STREET ADDRESS MIAMI, FL 33175 CITY-ST-ZIP CITY-ST-ZIP 33:74 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete ☐ Chance ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Detete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 trostee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if indicated on this report or supplement the corporation of the receiver or changed, or on an attachment with an address, with all other like empowered. mo laws. SIGNATURE: _-SIGNATURE AND TYPED OR RENTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED

54061010

Afforhment

June 30, 2004

Secretary of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Re: Greny Dollar Discount Corp P03000013976

Gentlemen:

It has come to our attention that our corporation was dissolved for failure to file timely the annual business report. Our company had changed its address and apparently the report was misplaced during the change. We did not receive the annual report form.

We request that the late fee be waived.

Sincerely:

President