2008 FOR PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # P03000073397 1. Entity Name MR. DOLLAR STORE & PLUS, INC.



Principal Place of Business

5612 NW 167 STREET MIAMI, FL 33014-6135 US Mailing Address

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FILED Apr 02, 2008 08:00 All Secretary of State



DO NOT WRITE IN THIS SPACE

03152008 No Chg-P CR2E034 (11/05)

4. FFI Number 65-1195314

Not Applicable

Applied For

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TZEGGAI, YERUSALEM M 12677 SW 44TH ST. MIRAMAR, FL 33027

DO NOT WRITE IN THIS SPACE

B. '	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
- 1	the obligations of registered agent.	•
		,

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be

After May 1, 2008 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME TZEGGAI, YERUSALEM M 04/14/08-80037-002 150 00 STREET ADDRESS 12677 SW 44TH ST. CITY-ST-ZIP MIRAMAR, FL 33027 TILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP 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:

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daveme Phone #