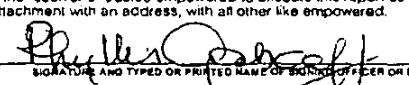


FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90273 032 ***150.00

2007 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P05000122374			
1. Entity Name PAYLESS ENTERPRISES, INC.			
Principal Place of Business 111 N PINE ISLAND ROAD STE 205 PLANTATION, FL 33324		Mailing Address 111 N PINE ISLAND ROAD STE 205 PLANTATION, FL 33324	
2. Principal Place of Business - No P.O. Box # 44 SE 14th St		3. Mailing Address 44 SE 14th St.	
Suite, Apt. #, etc. Apt 101		Suite, Apt. #, etc. Apt 101	
City & State Boca Raton, FL		City & State Boca Raton, FL	
Zip 33432		Country Palm Beach	
4. FEI Number 04-3826726		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DSOUZA, ELIAS L ESQ 111 N PINE ISLAND ROAD STE 205 PLANTATION, FL 33324		7. Name and Address of New Registered Agent Name: DSOUZA ELIAS ESQ Street Address (P.O. Box Number is Not Acceptable) 111 N. Pine Island Rd. Ste 205 City: Plantation FL 33324	
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 _____ (NOTE: Registered Agent's signature required when renewing) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY- ST- ZIP DPS GABAEFF, RHYLLIS 44 SE 14th St STE 101 BOCA RATON, FL 33432		TITLE NAME STREET ADDRESS CITY- ST- ZIP Rhyllis Gabaeff 44 SE 14th St BOCA RATON, FL 33432	
TITLE NAME STREET ADDRESS CITY- ST- ZIP		TITLE NAME STREET ADDRESS CITY- ST- ZIP	
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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: 		March 31, 07 391-3579	