2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000123476

Entity Name: EXPRESS 4 LESS INC.

FILED Sep 04, 2007 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

2445 NW 179TH TERRACE 5490 NW 94TH TERRACE MIAMI, FL 33056 SUNRISE, FL 33351 US

Current Mailing Address: New Mailing Address:

321 JERRIEL STREET 116 FOREST LAKE DRIVE APT # 31 WARNER ROBINS, GA 31093 US VIDALIA, GA 30474 US

FEI Number: 14-1978105 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

POUGH, PORCHIA POUGH, PORCHIA 2445 NW 179TH TERRACE 5490 NW 94TH TERRACE MIAMI, FL 33056 SUNRISE, FL 33351

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.

SIGNATURE: 09/04/2007

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

() Delete Title: (X) Change () Addition

SUMMERSET, SONYA R SUMMERSET, SONYA R Name: Name: 321 JERRIEL ST APT #31 Address: 116 FOREST LAKE DRIVE Address: City-St-Zip: VIDALIA, GA 30474 US City-St-Zip: WARNER ROBINS, GA 31093 US

Title: VΡ Title: VΡ (X) Change () Addition () Delete POUGH, PORCHIA Name: Name:

POUGH, PORCHIA 2445 NW 179TH TERRACE Address: 5490 NW 94TH TERRACE Address: MIAMI, FL 33056 US SUNRISE, FL 33351 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Ρ SIGNATURE: SONYA R. SUMMERSET 09/04/2007