FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P92000003702 (7)

DOLLAR OUTLET, INC.

Principal Place of Business Mailing Address

FILED Mar 30 1998 8:00am Secretary of State



4539 S KIRKMAN RD #7 ORLANDO FL 32811	4628 S ORANGE BLOSSO ORLANDO FL 32839 US	OM TRAIL	DO NOT WRITE IN THIS 3. Date Incorporated or Qualified 11/12/1992	S SPACE
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		59-3150158	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Countr	·	Country	8. This corporation owes or has paid the co	
24 25		30]	Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name				
KHAN, ABUL				
4628 S ORANGE BLOSSOM TRAIL			82 Street Address (P.O. Box Number is Not Acceptable)	
ORLANDO FL 32839		83		
		84 City	FI	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.				
SIGNATURE				
	no of registered agent and tille it applicable. (NOTI DEFICERS AND DIRECTORS	E: Registered Agent signature	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
12. C	DELETE	1.1 TITLE		
J 7		1.2 NAME	ABUL H. ICHAN (PRESIDEN 11736 Roedy Creek DY APT.	ا توسیس
NAME KHAN, ABUL H STREET ADDRESS 4628 S ORANGE BLOSSOM TRAIL		1.3 STREET ADDRESS	(PRE SYDEN	'
CITY-ST-ZIP ORTLANDO FL	, DECOSOM TYPIC	1.4 CITY-ST-ZIP	11/36 Keedy Creck DY APT.	3-207 08 0000
TITLE D	DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME KHAN, KAUSAR		2.2 NAME		
STREET ADDRESS 4628 S O B T		2.3 STREET ADDRESS		
CITY-ST-ZIP ORLANDO FL		2. 4 CITY - ST - ZIP		
TITLE	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY - ST - ZIP		
TITLE	☐ DELE te	4.1 THILE		Change Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE	DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP	F-1	5.4 CITY - ST - ZIP		——————————————————————————————————————
TITLE	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME				
1		6.2 NAME		
STREET ADDRESS		6.2 NAME 6.3 STREET ADDRESS		

indicated on this annual report or supplemental annual 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 or required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.