

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

FILED
May 14 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000078588 (9)

1. Corporation Name
DOLLAR HEAVEN, INC.

Principal Place of Business
2721 N DIXIE HWY
WILTON MANORS FL 33334

Mailing Address
2721 N DIXIE HWY
WILTON MANORS FL 33334-3726



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21		26		11/15/1993		05/01/1996	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number		Applied For	
22		27		65-0444409		Not Applicable	
City & State		City & State		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
23		28		☐		☐	
Zip		Country		6. Election Campaign Financing		\$5.00 May Be Added to Fees	
24		25		Trust Fund Contribution		☐	
Country		Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		☐ Yes ☐ No	
29		30					

9. Name and Address of Current Registered Agent

CHOWDHURY, A
3820 NE 10TH AVE
OAKLAND FL 33334

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
1002 N.E 38TH ST.
83
OAKLAND FL
84 City
OAKLAND PK, FL 85 Zip Code
33334

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstalling)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	CHOWDHURY, S.	1.2 NAME	
STREET ADDRESS	9908 S PRAIRIE ST	1.3 STREET ADDRESS	
CITY-ST-ZIP	DENVER CO 80122	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	☒ Change ☐ Addition
NAME	CHOWDHURY, A.	2.2 NAME	
STREET ADDRESS	3820 NW 110TH AVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL SPRINGS FL 33065	2.4 CITY-ST-ZIP	
TITLE	TD	3.1 TITLE	☒ Change ☐ Addition
NAME	CHOWDHURY, AKRAMUZ	3.2 NAME	
STREET ADDRESS	1002 NW 110TH AVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL SPRINGS FL 33065	3.4 CITY-ST-ZIP	
TITLE	SD	4.1 TITLE	☒ Change ☐ Addition
NAME	HAQ, KAZI	4.2 NAME	
STREET ADDRESS	2721 N. DIXIE HWY	4.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL 33334	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 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 as 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.

SIGNATURE:

Kazi Haq

427-97954565 6885

CR2E034 (9/96)