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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra #. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000032298 (9)

LUCKY	DOLLAR, INC.	``			410 1 <u>11110 11810 1810</u> 0 2011 1801
Principal Place	e of Business	Mailing Address			HO HIDIO (IELE ELIDI 1014 1064
10930 W FLAGER 75 S.W. 116TH AVENUE 305 MIAMI FL 33174 MIAMI FL 33174				DO NOT WRITE IN THIS	S SPACE
US				3. Date Incorporated or Qualified	
				04/28/1994	
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0486131	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State City & State			8. Election Campaign Financing	\$5.00 May Be	
23 28			Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has paid the c	urrent year Intangible
24	25		30	Personal Property Tax due June 30.	Yes No
ļ	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New Registere	d Agent
GAF	rcia, jorge		81 Name		
75 S.W. 116TH AVENUE			B2 Street Add	dress (P.O. Box Number is Not Acceptable)	
MIAMI FL 33174			<u> </u>		<u>.</u>
			83		
			84 City		85 Zip Code
			'	F	
office or r agent I a SIGNATURE	to the provisions of Sections 697.05 egistered agent, or both, in the Stat im familiar with, and accept the oblig	02 and 607.1508, Florida Statutes e of Florida. Such change was au gations of, Section 607.0505, Flor	s, the above-named co athorized by the corpor- ida Statutes.	rporation submits this statement for the purpose ation's board of directors. I hereby accept the a	of changing its registered population as registered
	Signature, typed or printed name of registered ag	<u></u>	Registered Agent aignature req		
12.		VD DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PD	L] DELETE	1,1 TITLE		Change L Addition
NAME	GARCIA, JORGE		1.2 NAME		
STREET ADDRESS	75 S.W. 116TH AVE.		1.3 STREET ADDRESS		ļ
CITY-ST-ZIP	MIAMI FL 33174	- Druffer	1.4 CITY - ST - ZIP		[] 0
TIFLE	SD AND AND A	☐ DELĒTE	2.1 TITLE		Change Addition
NAME	GARCIA, AIDA		2.2 NAME		
STREET ADDRESS	75 S.W. 116TH AVE.		2.3 STREET ADDRESS		ļ
CITY-ST-ZIP	MIAMI FL 33174	- Driese	2.4 CITY - ST - ZIP		Change
TITLE	TD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	DE LEON, IVETTE		3.2 NAME		
STREET ADDRESS	75 S.W. 116TH AVE.		3.3 STREET ADDRESS		}
CITY-ST-ZIP	MIAMI FL 33174	DELETE	3.4. City-St-zip		Change Addition
TITLE	•				C Change C Audition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		j
CITY-\$1-ZIP		DELETE	4.4 CITY-ST-ZIP		Change Addition
TITLE		C pricit	5.1 TITLE		C Onange C Notition
NAME			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		ļ
CITY-ST-ZIP		DELETE	54 CITY-ST-ZIP		Change Addition
TITLE		□ bereit	6.1 TITLE		C Outside C Virgingi
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		!

14. I 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 suppliemental 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

OF MANING OFFICER OR DIFFECTOR

Offset 910

(305) 554-1166 Dayline Phone # 1000000

FILED

Apr 27 1998 8:00am

Secretary of State