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PROFIT CORPORATION ANNUAL REPORT

1997



Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400080069 (5)

HEADQUARTER 99 CENTS STORE, INC.

FILED May 01 1997 8:00am Secretary of State

	i 880)) 881/18 81/18 18/1 1881

Principal Place of Business Mailing Address	3	I INDIIRALITA INCIENTALIA NOTALI NOTALI NOTALI	i Bailde (Bille Amell amela Melle (are 1801)
707 N.W. 119TH ST. 1600 NE 135 ST			
MIAMI FL 33168 #910	4700		
MIAMI FL 33181-	-1 /35	3. Date Incorporated or Qualified	3a. Date of Last Report
••		10/31/1994	03/20/1996
2. Principal Place of Business 2a. Mailing Addr	ress	4. FEI Number	Applied For
26 2025	5" NE 164 ST	65-0528369	Not Applicable
Suite, Apt. #, etc. Suite, Apt. # 27 \$ 1.7	, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State City & State		6. Election Campaign Financing	\$5.00 May Be
28 N.M.A.	MI BEACH, FL	Trust Fund Contribution	Added to Fees
Zip Country Zip	Country	8. This corporation has liability for i	gtangible tax under s. 199.032,
24 25 29 33166	2. [30]	Florida Statutes	Yes No
9. Name and Address of Current Registered Agent		10. Name and Address of New Re	gistered Agent
CHARANIA, AZIZ A SAME REGIS	tered 81 Name	HARANIA, AZIZ	Δ
CHARANIA, AZIZ A 1800 N.E. 135TH STREET Agent only	M 82 Sturiot Ac	idress (P.O. Box Nuri iber is Not Acceptat	le)
# 910	202	5 NE 164 ST	
N. MIAMI FL 33181 adress the	15h > 83 ADT	, 017.	
	84 City	- 017	85 Zip Code
		MI BEACH	FL 85 Zip Code 33168 .
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Flori	ida Statules, the above-named c	orporation submits this statement for the p	urpose of changing its registered
office or registered agent, or hoth, in the State of Florida. Such char agent, I am familiar with, and accept the obligations of, Section 607	nge was authorized by the corpo 1.0505. Florida Statutes.	ration's board of directors. I hereby accep	nt the appointment as registered
· · · · · · · · · · · · · · · · · · ·			
SIGNATURE Signature, typed or printed name of registered agent and title if application	(NOT) Hegistered Agent signature re	quired when reinstating)	DATE
12. OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
	ELETE 1.1 TITLE		Change Addition
NAME CHARANIA, AZIZ A	1.2 NAME		
STREET ADDRESS 1600 N.E. 135TH STREET, # 910	1.3 STREET ADDRESS		
CITY-ST-ZIP N. MIAMI FL 33181	1.4 CHY-ST-ZIP		
	DECETE 2.1 TITLE		Change Addition
NAME	2.2 NAME		
STREET ADDRESS	2.3 STREET ADDRESS	:	
City-St-ZiP	2 4 CITY - ST - ZIP		
TITLE	DELETE 31 TILLE		Change [] Addition
NAME	3.2 NAME		
STREET ADDRESS	3.3 STREET ADDRESS		
CITY-ST-ZIP	3 4. CHY- \$1-7IP		
	DELETE 4 1 TITLE		Change Addition
NAME	4 2 NAME		
STREET ADDRESS	4.3 STREET ADDRESS		
CITY-ST-ZIP	4.4 CITY - ST - 7HP		
	DELETE 5.1 TITLE		Change Addition
NAME	5 2 NAME		
STREET ADDRESS	5.3 STREET ADDRESS		
CITY-ST-ZIP	5.4 CHY- \$1-7(P		
	DELETE 6.1 TALE		Change Addition
	B		•
	6.2 NAME		
NAME CTOCCT ADDRESS	6.2 NAME		
STREET ADDRESS CITY-ST-ZIP	6.2 NAME 6.3 STRFFT ADDRESS 6.4 CTY-S1-7IP		

Information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same logal 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 if chapter 607, or on an attachment with an address. 02-06-97 (305)687-3111.

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