

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 09, 2002 8:00 am
Secretary of State

04-09-2002 91183 043 ***158.75

DOCUMENT # P94000080069

1. Entity Name
HEADQUARTER 99 CENTS STORE, INC.

Principal Place of Business
**707 N.W. 119TH ST.
 MIAMI FL 33168**

Mailing Address
**2025 NE 164 ST
 817
 N. MIAMI BEACH FL 33162
 US**

2. Principal Place of Business

3. Mailing Address
19451 SW 39 street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
MIRAMAR, FL

4. FEI Number
65-0528369

Applied For

Not Applicable

Zip

Country

Zip
33029

Country
BROWARD

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**CHARANIA, AZIZ A
 2025 NE 164 ST.
 APT. 817
 N. MIAMI FL 33162**

7. Name and Address of New Registered Agent

Name
CHARANIA, AZIZ A

Street Address (P.O. Box Number is Not Acceptable)
19451 SW 39 STREET

City
MIRAMAR

FL

Zip Code
33029

8. 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 **Aziz CHARANIA (PD)**

03/29/02

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**PD
 CHARANIA, AZIZ A
 2025 NE 164TH ST #817
 N. MIAMI FL 33162** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**V
 AKBAR CHARANIA
 2025 NE 164TH ST #817
 NORTH MIAMI FL 33162** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**PD
 CHARANIA, AZIZ A
 19451 SW 39 street
 MIRAMAR, FL 33029** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**V
 AKBAR CHARANIA
 19451 SW 39 street
 MIRAMAR, FL 33029** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED CHARANIA

03/29/02 (305) 725-0093

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0256866 AV

CR2E034 (9/01)