

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION  
ANNUAL REPORT  
**1996**



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

DOCUMENT # **P95000013707 (1)**

1. Corporation Name

**A1 DOLLAR STORE, INC.**



Principal Place of Business

~~6086 FOREST HILL BLVD.  
SUITE 109  
WEST PALM BEACH FL 33415~~

Mailing Address

~~6086 FOREST HILL BLVD.  
SUITE 109  
WEST PALM BEACH FL 33415~~

3. Date Incorporated or Qualified  
**02/17/1995**

3a. Date of Last Report

2. Principal Place of Business

21 **5335 N. MILITARY TR. # 39**

Suite, Apt. #, etc.

22 **W. PALM BCH - FL 33407**

City & State

23

Zip

Country

25 **PALM BEACH**

2a. Mailing Address

26 **A-1 DOLLAR STORE INC.**

Suite, Apt. #, etc.

27 **5335 N. MILITARY TRAIL #39**

City & State

28

Zip

29 **33407**

Country

30 **PALM BEACH**

4. FET Number

**65-0558267**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

**\$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s 199.032, Florida Statutes

Yes

No

9. Name and Address of Current Registered Agent

**AMERILAWYER  
343 ALMERIA AVE.  
CORAL GABLES FL 33134**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
P	RAO, JAGDISH G	6086 FOREST HILL BLVD.	WEST PALM BEACH FL 33415	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
PRESIDENT	LAL SINGH BIST	1579 QUAIL DR # 208	W. P. B. FLA 33409	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

*Lal Singh Bist*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-30-96 407-471-9061

Date

Daytime Phone #

CR2E034 (12/95)