**PROFIT** ANNUAL REPORT 1999



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

## DOCUMENT # P95000071912

MARSAR DOLLAR DISCOUNT, INC.

Principal Place of Business 1900 EAST 4TH AVENUE #B HEALEAH FL 33010

2. Principal Place of Business

Suite, Apt. #, etc.

SIGNATURE:

City & State

21

22

Mailing Address

1900 EAST 4TH AVENUE #B

HIALEAH FL 33010

2a. Mailing Address

City & State

Suite, Apt. #, etc.

LONATURE REQUIRED

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27

## **FILED** Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90127 027 \*\*\*150.00 05-17-1999 90019 004 \*\*\*\*\*8.75

Applied For

Not Applicable

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Feee



DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualifed 09/18/1995

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

4. FEI Number 65-0606046

Zip	Country	Zip	Country	8. This corporation owes the current ye			
24]		29	so	Personal Property Tax.	` 🗆 Yes	□ No	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
MARTINEZ, MARLON E				81 Name Angel Cuervo.			
			82 Street Address (P.O. Box Number is Not Acceptable)				
2935 NW 23RD AVENUE			132 ANNIAL TENTACE				
MIAMI FL			[83]				
			84 City	Higleon Gardens	FL 85 Zip C	COD8	
44 0	to the provisions of Spatiana 607 0502	and 807 1509 Florida Statutes	the shove-named o	emoration submits this statement for the ourog	se of changing its	registered	
office or re	egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida, Such change was aut	horized by the corpor	ation's board of directors. I hereby accept the	appointment as req	istered	
	Y Viumo			(	<i>ろー30</i> ー	99	
SIGNATURE	Signature, typed or ponted name of registered agent a	and title if applicable. (NOTE: F	tegistered Agent signature mo		TE		
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTO		
TITLE	D	DELETE	1,1 TITLE	President/Secre	797 U Change	. Addition	
NAME	MARTINEZ, MARLON E		1.2 NAME	Angel Cueru	0	j	
STREET ADDRESS	2935 NW 23RD AVENUE		1.3 STREET ADDRESS	Angel Cuery 9382 121 Tes	rean o	i	
CITY-ST-ZIP	MIAM) FL 33142	1	1.4 CITY-ST-ZIP				
TITLE	D	DELETE	2.1 TITLE	Higleah Garden	5 □ Change	☐ Addition	
NAME	MARTINEZ, SARA G		22 NAME	FL 330	18.	- 1	
STREET ADDRESS	2935 NW 23RD AVENUE		2.3 STREET ADDRESS	, 6 330	10		
CTTY-ST-ZIP	MIAMI FL 33142		2.4 CITY-ST-ZIP				
TITLE	112-011 T C 30 14E	OELETE	3.1 TITLE		☐ Change	Addition	
NAME 15		<b>3</b>	3.2 NAME				
			3.3 STREET ACORESS	ستعين بيرسيطند من ب سند _			
STREET ADDRESS			3.4. CITY-ST-ZIP			ŀ	
CITY-ST-ZIP		DELETE	4.1 TITLE		☐ Change	Addition	
TITLE -			4.2 NAME	,	<u></u>		
NAME						f	
STREET ADDRESS		•	4.3 STREET ADDRESS				
CITY-ST-ZIP		☐ DELETE	4,4 (JTY-ST-ZIP		Change	Addition	
TITLE		☐ NETE(E	5.1 TITLE 5.2 NAME				
NAME				•			
STREET ADDRESS			5.3 STREET ADDRESS			{	
CITY-ST-ZIP			5.4 GITY-ST-ZIP		Clob	- CT Adellic -	
TITLE		☐ DELETE	6.1 TITLE		Change	Addition	
NAME			6.2 NAME			1	
STREET ADDRESS			6.3 STREET ADDRESS				
CTTY-ST-ZIP			8.4 CITY-ST-ZIP				
14. I hereby of indicated officer or officer or of the control of	a letnemelonus to boom leunne sidt no	nnual report is true and accura or trustee empowered to exe	ite and that my signat cute this report as re	n Section 119.07(3)(i), Florida Statutes. I furth ure shall have the same legal effect as if madi quired by Chapter 607, Florida Statutes; and t	ungeroam; maci	am an	