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

PROFIT CORPORATION ANNUAL REPORT

1**9**98

FLORIDA DELEGRAMENT GRAFATE

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700007651 (7)

DOLLAR WORLD, INC.

rincipal ri	ace of positiess
	<u>.</u>
235 71ST	STREET
401444 00	AND PE AND AL
MINNI REA	ACH FE 33141

Block 12 or Block 13

Mailing Address

235 71ST STREET MIAMI BEACH FL 33141 FILED Jun 30 1998 8:00am Secretary of State



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DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/27/1997 2. Principal Place of Business 2a. Mailing Address Applied For 65-0733160 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Country This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. Yes □ No Name and Address of New Registered Agent Name and Address of Current Registered Agent Name GHULAMALI. SALIM 5425 N.W. 184 STREET 82 MIAMI BEACH FL 33141 83 3**0**33 84 2ip Code 3300 City 11. Pursuant to the provisions of Socions 607 0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office a registered agent. I am fail may with, and a country to obligations of Socions 607.0505, Florida Statutes.

SIGNATURE

1. A NOWANI

1. A NOWANI OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change TITLE 1.1 TITLE I PANJWANI 18944 NW 54 AVE TROSIDENT 1.2 NAME NAME 1.3 STREET ADDRESS STREET ADDRESS FL 33055 1.4 CITY-ST-ZIP CITY-ST-ZIP AMIRALI PANJWANI DELETE SUZS NW 184 ST. VICE RE Change Addition 2.1 TITLE TITLE 3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY ST-ZIP 4.4 CITY-ST-ZIP NW 6.30-98 DEFEIE Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY ST-ZIP 54 CITY-ST-ZIP DELFIE Change Addition 6.1 TITLE TITLE 100002577811 NAME 6.2 NAME -07/01/88--01054--012 STREET ADDRESS **6.3 STREET ADDRESS** ***150,00 6.4 CITY-ST-ZIP CITY-ST-ZIP 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 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 this dorporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in