

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000024856 1. Entity Name ALEGRE DOLLAR STORE, CORP.	
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Principal Place of Business 421 W. 29TH ST. HIALEAH, FL 33012-5700	Mailing Address 421 W. 29TH ST. HIALEAH, FL 33012-5700
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DO NOT WRITE IN THIS SPACE

FILED
CLERK OF STATE
DIVISION OF CORPORATION
04 MAY 10 PM 1:24



03012003 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0742167	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent ARCIA, LUIS 421 W. 29TH ST. HIALEAH, FL 33012-5700	DO NOT WRITE IN THIS SPACE
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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fee	300037045349 05/24/04--01079--007 **900.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST ARCIA, LUIS 421 W. 29TH ST. HIALEAH, FL 330125700
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Luis Arcia 05-07-04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #