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PROFIT CORPORATION ANNUAL REPORT

· 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

FILED

Feb 11 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000092597 (8)

A & S DOLLAR STORE, INC. Principal Place of Business Mailing Address 3181 WEST VINE STREET 3181 WEST VINE STREET KISSIMMEE FL 34741 KISSIMMEE FL 34741 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/27/1997 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 543472560 Not Applicable 26 Suite, Apt #, etc Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country 8. This corporation owes or has paid the current year Injurgible Yes Personal Property Tax due June 30. 1 No 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name AISSAM, MOHAMED S 3181 WEST VINE STREET Street Address (P.O. Box Number is Not Acceptable) 82 KISSIMMEE FL 34741 83 84 City 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, am lamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when reinstating) typed or printed name of reorstered about and for it applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 11 TITLE aissam, mohamed s NAME 12 NAME 3181 WEST VINE STREET STREET ADDRESS 1.3 STREET ADDRESS KISSIMMEE FL 34741 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE ☐ Addition Change TITLE 2.1 TITLE SAYF-AL-NASR, MANSOUR NAME 2.2 NAME 3181 WEST VINE STREET STREET ADDRESS 2.3 STREET ADDRESS KISSIMMEE FL 34741 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE 31 TITLE Change Addition TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change ☐ Addition TITLE 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition DELETE 5.1 TITLE TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - \$1 - ZIP CITY-ST-ZIP Change Addition TITLE DELETE 6 1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f). 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 controllation or the receiver or trustee empowered thexecute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if crumped or on an attachment with an address.

SIGNATURE: