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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000092597

1. Corporation Name

Z & O DOLLAR STORE, INC.

Principal Pla	ce of Business
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Mailing Address

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90297 017 ***150.00



0101 WEST VINE STREET KISSIMMEE FL 34741	3181 WEST VINE STREET KISSIMMEE FL 34741			DO NOT WRITE IN THIS SPACE			
				3. Date Incorporated or Qualifed 10/27/1997			
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	Applied For		
<u> </u>	26			59-3472560	Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		-		\$8.75 Additional Fee Required		
City & State	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip Country	Zip Co	untry		This corporation owes the current year Intang Personal Property Tax.	rible] Yes ⊠ No		
9. Name and Address of C	Current Registered Agent			10. Name and Address of New Registered Ag	ent		
AISSAM, MOHAMED S		81	Name				
3181 WEST VINE STREET		82	Street Addre	ess (P.O. Box Number is Not Acceptable)			
KISSIMMEE FL 34741	,	83					
	•	84	City	CONTRACTOR ASPE	85 Zip Code		
11. Pursuant to the provisions of Sections 60	07.0502 and 607.1508, Florida Statutes, the	above	e-named corpo	ration submits this statement for the purpose of ch	anging 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: If	Registered Agent signature requi		-
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	
TITLE	D . DELETE	1.1 TITLE	☐ Change ☐ A	Addition
NAME	AISSAM, MOHAMED S	1.2 NAME		
STREET ADDRESS	3181 WEST VINE STREET	1.3 STREET ADDRESS		
CITY-ST-ZIP	KISSIMMEE FL 34741	1.4 CITY-ST-ZIP		
TITLE	D DELETE	2.1 TITLE	☐ Change ☐ A	Addition
NAME	SAYF-AL-NASR, MANSOUR	2.2 NAME		ľ
STREET ADDRESS	3181 WEST VINE STREET	2.3 STREET ADORESS		. 1
CITY-ST-ZIP	KISSIMMEE FL 34741	2.4 CITY-ST-ZIP		
TITLE	☐ DELETE	3.1 TITLE	Change A	ddition
NAME		3.2 NAME		1
STREET ADDRESS		3.3 STREET ADDRESS		ĺ
CITY-ST-ZIP		3.4. CITY-ST-ZIP		
TITLE	C) DELETE	4.1 TITLE	☐ Change ☐ A	Addition
NAME		4.2 NAME		ļ
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE	☐ DELETE	5.1 TITLE	Change A	Addition
NAME		5.2 NAME		Į
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY+ST+ZIP		
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ A	Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP	Deather 440 07/000 Floride Statutes I further contifu that the information	

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 informati 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, with all other like empowered.

SIGNATURE:

April 27/94 (c/07) 8470301