

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000093844

1. Entity Name

LOU'S 99 CENT PLUS RETAIL STORE, INC.

FILED
May 10, 2001 8:00 am
Secretary of State

05-10-2001 90045 016 ***150.00

Principal Place of Business

10775 BISCAYNE BLVD
MIAMI FL 33161
US

Mailing Address

10775 BISCAYNE BLVD.
MIAMI FL 33161

2. Principal Place of Business

10775 BISCAYNE BLVD
Suite, Apt. #, etc.

3. Mailing Address

10775 BISCAYNE BLVD
Suite, Apt. #, etc.

City & State

MIAMI FLORIDA

City & State

MIAMI FLORIDA

4. FEI Number

65-0805683

☒ Applied For
☐ Not Applicable

Zip

33161

Country

USA

Zip

33161

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MICHEL, ZELIA
175 N.E. 131ST STREET
NORTH MIAMI FL 33161

7. Name and Address of New Registered Agent

Name

MICHEL ZELIA

Street Address (P.O. Box Number is Not Acceptable)

175 NE 131ST

City

NORTH MIAMI FLORIDA

FL

Zip Code

33161

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE DP
NAME DEUS, LOUBERT
STREET ADDRESS 140 N.E. 138TH STREET
CITY-ST-ZIP MIAMI FL 33162 ☐ Delete

TITLE DT
NAME DEUS, FANETTE
STREET ADDRESS 1540 N.E. 138TH STREET
CITY-ST-ZIP MIAMI FL 33162 ☐ Delete

TITLE DS
NAME CADET, FLORIDA
STREET ADDRESS 1540 N.E. 138TH STREET
CITY-ST-ZIP MIAMI FL 33162 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

LOUBERT DEUS

4/25/01

305-899-1007

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)