


**FILED**  
**Apr 23, 1999 8:00 am**  
**Secretary of State**

04-23-1999 90176 007 \*\*\*158.75

<b>PROFIT CORPORATION ANNUAL REPORT 1999</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> <b>Secretary of State</b> <b>DIVISION OF CORPORATIONS</b>
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DOCUMENT # P98000046254

1. Corporation Name

62 STREET DOLLAR STORE INC



Principal Place of Business  
 6230 NW 6 AVE  
 MIAMI FL 33150

Mailing Address  
 6230 NW 6 AVE  
 MIAMI FL 33150

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/20/1998

4. FEI Number

65-0835529

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional

Fee Required.

6. Election Campaign Financing Trust Fund Contribution

☐

\$5.00 May Be Added to Fees

8. This corporation owes the current year intangible Personal Property Tax.

☒ Yes☐ No

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

CHARANIA, AZIZ  
 2025 NE 164 STREET #817  
 NORTH MIAMI BEACH FL 33162

81 Name

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

83

84 City

FL

85 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. 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: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

PRESIDENT  
 AZIZ CHARANIA  
 2025 NE 164 ST #817  
 NORTH MIAMI BEACH FL 33162

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ 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

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE  
 1.2 NAME  
 1.3 STREET ADDRESS  
 1.4 CITY-ST-ZIP

PRESIDENT  
 AZIZ CHARANIA  
 2025 NE 164 ST #817  
 NORTH MIAMI BEACH, FL 33162

2.1 TITLE  
 2.2 NAME  
 2.3 STREET ADDRESS  
 2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE  
 3.2 NAME  
 3.3 STREET ADDRESS  
 3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE  
 4.2 NAME  
 4.3 STREET ADDRESS  
 4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE  
 5.2 NAME  
 5.3 STREET ADDRESS  
 5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE  
 6.2 NAME  
 6.3 STREET ADDRESS  
 6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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 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:

*[Signature]*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/99 (305) 947-4471

Date

Daytime Phone #

CR2E034 (1/98)