

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

FILED
Feb 23, 1999 8:00 am
Secretary of State

02-23-1999 90103 038 ***150.00

DOCUMENT # V34542

1. Corporation Name

DISCOUNT CLOSETS OF FLORIDA, INC.

DISCOUNT CLOSETS, INC

Principal Place of Business

12450 SW 117 CT
MIAMI FL 33186
US

Mailing Address

12450 SW 117 CT
MIAMI FL 33186
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/05/1992

4. FEI Number

65-0339087

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

2. Principal Place of Business

21 12508 SW 117 CT

2a. Mailing Address

26 12508 SW 117 CT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 MIAMI FLA

City & State

28 MIAMI FL

Zip

24 33186

Country

25 USA

Zip

29 33186

Country

30 USA

9. Name and Address of Current Registered Agent

MANHEIM, ALFRED
5901 SW 74TH STREET
SUITE 403
MIAMI FL 33143

10. Name and Address of New Registered Agent

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)

1/8/99

DATE

12.

OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
DICK, ROBERT
STREET ADDRESS
12450 SW 117 CT
CITY-ST-ZIP
MIAMI FL

TITLE ☐ DELETE

NAME
RIVERA, DENNIS
STREET ADDRESS
12450 SW 117 CT
CITY-ST-ZIP
MIAMI FL 33186

TITLE ☐ DELETE

NAME
MERSCHON, SCOTT
STREET ADDRESS
12450 SW 117 CT
CITY-ST-ZIP
MIAMI FL 33186

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

PRESIDENT

☒ Change ☐ Addition

1.2 NAME

D CHRISTIANS, Robert D.

1.3 STREET ADDRESS

12508 SW 117 CT

1.4 CITY-ST-ZIP

MIAMI, FL 33186

2.1 TITLE

VICE PRESIDENT

☒ Change ☐ Addition

2.2 NAME

RIVERA, DENNIS

2.3 STREET ADDRESS

12508 SW 117 CT

2.4 CITY-ST-ZIP

MIAMI, FL 33186

3.1 TITLE

Sec.

☒ Change ☐ Addition

3.2 NAME

Merschon, Scott

3.3 STREET ADDRESS

12508 SW 117 CT

3.4 CITY-ST-ZIP

MIAMI, FL 33186

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 and typed or printed name of signing officer or director

Date

Daytime Phone #

CR2E034 (11/98)

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