

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000021133

**Entity Name:** CAJUSTE 99 CENTS STORE PLUS CORP.

**Current Principal Place of Business:**

1543 N.W. 119TH STREET  
NORTH MIAMI, FL 33167

**FILED**  
**Apr 30, 2014**  
**Secretary of State**  
**CC5657347311**

**Current Mailing Address:**

1543 N.W. 119TH STREET  
NORTH MIAMI, FL 33167

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

FRANCOIS, SAJUSTE JEAN  
535 N.E. 132ND TERRACE  
NORTH MIAMI, FL 33161 US

*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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name FRANCOIS, SAJUSTE JEAN  
Address 535 N.E. 132ND TERRACE  
City-State-Zip: NORTH MIAMI FL 33161

Title VP  
Name JEAN, SHELLA  
Address 8500 BISCAYNE BLVD., LOT B221  
City-State-Zip: MIAMI FL 33138

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: FRANCOIS, SAJUSTE JEAN**

**PRESIDENT**

**04/30/2014**

Electronic Signature of Signing Officer/Director Detail

Date