

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

**FILED**  
**Mar 02, 1999 8:00 am**  
**Secretary of State**

03-02-1999 90100 002 \*\*\*150.00

11/2/99

PROFIT CORPORATION  
 ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # J69204**

1. Corporation Name  
**F & D INVESTMENTS, INC.**



Principal Place of Business % DENIS GRAVEL 1414 SOUTH FEDERAL HIGHWAY DANIA FL 33004	Mailing Address % DENIS GRAVEL 1414 SOUTH FEDERAL HIGHWAY DANIA FL 33004
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**04/23/1987**

2. Principal Place of Business 21 <b>2541 HAYES ST.</b> Suite, Apt. #, etc.	2a. Mailing Address 26 <b>2541 HAYES ST.</b> Suite, Apt. #, etc.	4. FEI Number <b>59-2792809</b>	Applied For Not Applicable
22	27	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
23 <b>Hollywood, FL</b> City & State	28 <b>Hollywood, FL</b> City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
24 <b>33020</b> Zip 25 <b>U.S.</b> Country	29 <b>33020</b> Zip 30 <b>U.S.</b> Country	8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent  
**GRAVEL, DENIS**  
**1414 SOUTH FEDERAL HIGHWAY**  
**DANIA FL 33004**

10. Name and Address of New Registered Agent  
 81 Name **DENIS GRAVEL**  
 82 Street Address (P.O. Box Number is Not Acceptable)  
**2541 HAYES ST.**  
 83  
 84 City **Hollywood** **FL** 85 Zip Code **33020**

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]* **DENIS GRAVEL** **01/18/99**  
(NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	<b>PD</b>	<input type="checkbox"/> DELETE
NAME	<b>VALEE, FRANCOISE</b>	
STREET ADDRESS	<b>33 SE 13TH STREET</b>	
CITY-ST-ZIP	<b>DANIA FL</b>	
TITLE	<b>STD</b>	<input type="checkbox"/> DELETE
NAME	<b>GRAVEL, DENIS</b>	
STREET ADDRESS	<b>33 SE 13TH STREET</b>	
CITY-ST-ZIP	<b>DANIA FL</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<b>PD</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	<b>VALEE, FRANCOISE</b>	
1.3 STREET ADDRESS	<b>2541 HAYES ST.</b>	
1.4 CITY-ST-ZIP	<b>Hollywood FL 33020</b>	
2.1 TITLE	<b>STD</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	<b>GRAVEL, DENIS</b>	
2.3 STREET ADDRESS	<b>2541 HAYES ST.</b>	
2.4 CITY-ST-ZIP	<b>Hollywood FL 33020</b>	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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]* **DENIS GRAVEL** **01/18/99** **954-922-2924**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)