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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400020471 (6)

D & F INVESTMENTS, INC.

FILED
Jan 17 1997 8:00am
Secretary of State



Principal Place of Business 407 LINCOLN RD. SUITE 10-L MIAMI BEACH FL 33139		Mailing Address 4415 MONSERRATE ST. SUITE 10-L CORAL GABLES FL 33146-1211 US		3. Date Incorporated or Qualified				
2. Principa	al Place of Business	2a. Mailing Address			4. FEI Number		IAp	plied For
21		26		65-0478256			t Applicable	
	Apt. #, etc.	Suite, Apt #, etc.				∇	\$8.75 A	
22		27			5. Certificate of Status Desired	X	Fee Re	
City & S	State	City & State			6. Election Campaign Financing	<i>I</i>	\$5.00	May Be
23		28			Trust Fund Contribution		Added to	
Zip	Country	Zip	Countr	ý	8. This corporation has liability for i	nangible ta	x under s.	199.032,
24	25	29	30		Florida Statutes	Yes 🔲	No	
	Name and Address of Cur	rent Registered Agent			10. Name and Address of New Re	pistered Ag	ent	
ı (Dahan, Simon		81	Name				
4415 MONSERRATE				Street Add	reet Address (P.O. Box Number is Not Acceptable)			
CORAL GABLES FL 33146								
			83	3				
			84	City			85 Zip C	Code
			67	City		FL	zip C	2000
SIGNATUR	Significial typed or printed have of registered	d agent and title it applicable. AND DIRECTORS	(NO ^Y E: Registered Aç	gent signature requ	ured when re-installing) ADDITIONS/CHANGES TO OFFIC	DATE	NECTOR	OC INI 10
TITLE	D OFFICERS.	DELETE			ADDITIONS/CHANGES TO OFFIC		Change	Addition
NAME	DAHAN, SIMON		1.2 NAME			L.	T outside	L radicor
STREET ADDRE	AAAE MONGEDDATE			T ADDRESS				
	CORAL GABLES FL							
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	ree 1730 N.E. 198TH TERRACE		2.2 NAME			Ľ	_ Change	
			2.3 STREE	T ADDRESS		Ĺ		
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I do nereby certify that the information supplied with this time does not qualify for the exemption stated in Section 119.07(3)(), Florida Statutes. I former certify that the information indicated on this annual report or supplemental annual report is true 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 roce were for 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 autress.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER O

1-12-9

305-665-1845