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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 184289

D & D PAINT DISTRIBUTORS, INC.

**(7)** 

FILED
May 14 1997 8:00am
Secretary of State



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Principal Place of Business Mailing Address											1	a emmiter gemmt emtite Staten bir	181 48118 1811	47811 41911 41	Mer Merrie dan	
C/O RHODA DEUTSCH					C/O RHODA DEUTSCH					Į		•			4	
2029-A HOLLYWOOD BLVD. 2029-A HOLLYWOOD BLVD																
HOLLYWOOD FL 33020 HOLLYWOOD FL 33020-450													S . 127 . 1	74. 5.		
										3. Date incorporated or Qualified 04/01/1955 3a. Date of Last Report 04/29/1996						
1	2. Principal Place of Business				2a. Mailing Address						4.	FEI Number			A	pplied For
21			26	26							59-0756714			<del></del>	lot Applicable	
l	Suite, Apt. #, etc.				Suite, Apt, #, etc.						5.	Certificate of Status De	asired			Additional
22	22				27						-					tequired
	∴ City & State =3				City & State						6.	Election Campaign Fir	_	r-1		May Be
23	Zip Country			28	Zip Country						- <del> </del>	Trust Fund Contributio		<u> </u>		to Fees
<del> </del>	Zip				'			unury			8. This corporation has liability for intengible tax under s. 199.032  Florida Statutes					
24		25 29 30 9. Name and Address of Current Registered Agent					Florida Statutes V Yes No  10. Name and Address of New Registered Agent									
DEUTSCH, RHODA										me	10.	Hanne Billo Address (	i iabat Ile	Aistolda v	gen	
[								81								
2029-A HOLLYWOOD BLVD. HOLLYWOOD FL 33020								82	Str	eet Addre	t Address (P.O. Box Number is Not Acceptable)					
HOLLI WOOD FL 33020								83								
1																
								84	Cit	y				FL	85 Zip	Code
11	Pursionit	o the prove	sions of Sections f	07.0502 and	607 1508	Florida Statu	ites the	ahove	-nar	ned corno	oratio	n submits this statemer	ot for the r		changing	its registered
1	office or r	egislereo a	gent, or both, in th	e State of Flo	rida Such	change was	authoriz	ed by	the	corporation	on's t	n submits this statemer poard of directors. I her	eby accel	of the appx	ointment a	s registered
l	agent Fa	m tamiliar w	vith, and accopt th	e obligations	ot, Section	1 607.0505, F	iorida St	atutes	3,							
SIC	SNATURE	Storadon, topo	J or printed name of reg-s	tend agent and b	to if pockcatil	n /N/	TF: Registe	ad Boo	nt eloc	alure require	d when	reinstation		DATE		
12. OFFICERS AND								13.				ADDITIONS/CHANGES	TO OFFIC		DIRECTO	RS IN 12
7/11		D				DELETE	1.1	TITLE							Change	Addition
NAM	r:	DEUTSC	H, ALAN S				1.2	NAME								
SIB	EET ADDRESS	2203 LIN	NCOLN ST				1.3	STAEET	ADDRI	SS						
CIT	y - S1 - ZIP	HOLLYM	VOOD, FL 00000	)			14	CITY-S	T- <i>7</i> IP							į
1111	,	P				DELETE		TITLE					, , , , , , , , , , , , , , , , , , ,		Change	Addition
NAS	at.	DEUTSC	CH, RHODA				22	NAME								
518	EEL ADORESS	2203 LIN	VCOLN ST				23	STREET	ADDRI	ss						
	y - \$1 - 21F	HOLLYM	VOOD, FL 00000	)			- 1	CHTY - S					•			Ì
III		ST				DELETE		TITLE				<del>,</del>			Change	Addition
NAN	vlí l	MOTLEY	/, Phyllis				3.2	NAME				•				
1	EET ADDRESS		INDRIDGE DR					STREET	ADORI	ss						
1	Y - S1 - 71P	CONYO	rs ga					CITY-S								
TITL	***************************************	***************************************				DELETE		TITLE							Change	Addition
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STH	RELI ADDRESS						4.3	STREET	ADORI	ESS						
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14. I do 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF BIGHING OFFICER OR DIRECTOR

april 29, 1997

954-927-310

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