## 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 # 532737

(4)

MCCALL'S FIX-ALL, INC.

Principal Place of Business  9841 N W 35TH ST HOLLYWOOD FL 33024  2. Principal Place of Business 21 Suite, Apt #, etc 22		2a. Mailing Addre 26 Suite, Apt. #. 6	9841 N W 35TH ST HOLLYWOOD FL 33024-8003  2a. Mailing Address 26 Suite, Apt. #, etc. 27			3. Date Incorporated or Qualified 05/02/1977  4. FEI Number 59-1740225  5. Certificate of Status Desired  3a. Date of Last Report 01/22/1996  Applied For Not Applicable \$8.75 Additional Fee Required				
City & State		City & State	City & State			Election Campaign Financi     Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zip	Country	Zip	Co	untry		8. This corporation has liabilit	y for intang	gible tax under s.		
24	25	29	30			Florida Statutes	Yes			
9841	9. Name and Address of Cui FALL, LOIS J. I N W 35TH ST LYWOOD FL 33024	rreni Hegistered Agent		81 82 83 84	Name Street A	10. Name and Address of Ne	eptable)	FL 85 Zip (	Code	
<ul> <li>office or re</li> </ul>	egistered agent, or both, in the Similar with, and accept the of	tate of Fiorida. Such chang oligations of, Section 607.0 nagerhand little (sopticable	e was authorize 505, Florida Sta	ed by atutes.	the corpo	corporation submits this statement for oration's board of directors. I hereby equired when reinstating)	the purpo	se of changing its appointment as	s registered registered	
.12.	<u>-</u>	AND DIRECTORS	13.			ADDITIONS/CHANGES TO	OFFICERS			
NAME STREET ADDRESS CITY-ST-ZIP	PD MCCALL, RICHARD C. 3541 N W 35TH ST HOLLYWOOD FL	ĹĴ DEL	1.21	TITLE Name Street a City-St	IDDRESS - ZIP			Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MCCALL, LOIS J. 3541 N W 35TH ST HOLLYWOOD FL	□ D£l	2.2 M 2.3 S	NAME	iddaess - Zip			Change	Addition	
THTLE NAME STREET ADDRESS CITY - ST - ZIP		DEL	3.2 N 3.3 S	NAME	iddress - Zip			Change	Addition	
STREET ADDRESS OFTY-ST-ZIP		□ DEL	ETE 4.11 4.21 4.35	iitle Name	.DDAESS			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ DĒL	ETE 5.11 5.2 M 5.3 S	TITLE NAME	DDRESS			Change	Addition	
NAME STREET ADDRESS CHTY-ST-ZIP 14. I do heret	by certify that the information sup	DEL	611 628 635 640 or qualify for the	TITLE NAME STREET A CITY-ST E EXEM	DDRESS	sted in Section 119,07(3)(i), Florida S	atutes. I fu	☐ Change	Addition	
informatio Lam an of appears i	in indicated on this annual report flicer or director of the corporation in Block 12 or Block 13 if changed	or supplemental annual report or the receiver or trustee the or on an attachment with	ort is true and empowered to an address. LOIS	accur execu	ate and to the this re MCC	hat my signature shall have the same port as required by Chapter 607, Flo	e legal effe rida Statuti	ct as if made und as; and that my n	per oath; that name	

SIGNATURE:

**FILED** 

Jan 22 1997 8:00am

Secretary of State

A REGIRI CITES HITO ALFAN NOORD HAND TOOL DYAKE DIGIT SALDT TANK DYAKE GIBLE LOOF