

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

PROFIT
CORPORATION
ANNUAL REPORT

1997 AMENDED



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 6747116
1. Corporation Name

Hollywood Imports Limited, Inc

Principal Place of Business

Mailing Address

2. Principal Place of Business

21 1480 N. State Road 7

Suite, Apt. #, etc.

22

City & State

23 Hollywood, FL

Zip

24 33021

Country

25 USA

2a. Mailing Address

26 110 SE Sixth St.

Suite, Apt. #, etc.

27

City & State

28 Ft. Lauderdale, FL

Zip

29 33301

Country

30 USA

3. Date Incorporated or Qualified

6/24/80

3a. Date of Last Report

4. FEI Number

59-2025810

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81

Name

82

Street Address (P.O. Box Number is Not Acceptable)

83

84

City

85

Zip Code

86

State

87

City

88

State

89

City

90

State

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, I, 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. I am familiar with, and accept the obligations of the corporation's board of directors, I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of the corporation's board of directors, I hereby accept the appointment as registered agent.

SIGNATURE

Conis Bryan

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

10/23/97

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME Michael Marcone

STREET ADDRESS 110 SE 64th St.

CITY-ST-ZIP Ft. Lauderdale, FL 33301

TITLE ☐ DELETE

NAME James P. Cole

STREET ADDRESS 110 SE 64th St.

CITY-ST-ZIP Ft. Lauderdale, FL 33301

TITLE ☐ DELETE

NAME Kathleen Hyle

STREET ADDRESS 110 SE 64th St.

CITY-ST-ZIP Ft. Lauderdale, FL 33301

TITLE ☐ DELETE

NAME Thomas W. Hawkins

STREET ADDRESS 110 SE 64th St.

CITY-ST-ZIP Ft. Lauderdale, FL 33301

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 SIGNING OFFICER OR DIRECTOR

10/23/97

954-713-5200

CR2E034 (9/96)