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PROFIT CORPORATION ANNUAL REPORT

1997

DITY-ST-7IP

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SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 17 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G55551

DOLLARS AND DEALS CORPORATION

Principal Place of Business Mailing Address 11740 SW 15 STREET 1641 N.W. 27TH AVENUE MIAMI FL 33125 MIAMI FL 33184-2558 3a. Date of Last Report 3. Date Incorporated or Qualified 07/29/1983 03/05/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-2307026 26 Not Applicable Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Zip Country Zip B. This corporation has liability for intengible tax under s. 199.032, Yes 🔲 No 29 30 Florida Statutes 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name BETANCOURT, TERESITA 11740 SW 15 STREET Street Address (P.O. Box Number is Not Acceptable) 82 MIAM! FL 33184 83 City Zip Code 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, typed or pented name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. STD DELETE Change Addition 1.1 TITLE TITLE **BETANCOURT, EDUARDO** NAME 12 NAME 11740 SW 15TH ST STREET ADDRESS 1.3 STREET ADDRESS MIAMI, FL 00000 CITY-ST-ZIP 14 City-St-ZiP DELETE PD Change Addition TITLE 21 TITLE **BETANCOURT, TERESITA** NAME 2.2 NAME 11740 SW 15TH STREET STREET ADDRESS 2.3 STREET ADDRESS **MIAMI FL 33184** CITY-ST-74P 2 4 CITY-ST-ZIP ■ DELETE Change Addition 3 1 TITLE TIME NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition 4.1 TITLE Change TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY - \$1 - ZIP 5.4 CITY-ST-ZIP DELETE Addition 6.1 TITLE THILE NAME 6.2 NAME 6.3 STREET ADDRESS 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

ment with an address.

ATLIRE AND TYPED OR PRINTED NAME