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

**PROFIT** CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H87962 HOWARD DORFMAN DISPLAYS, INC. (7)

Mailing Address

## **FILED** Jan 14 1997 8:00am Secretary of State



% HENRYETTA DORFMAN 5076 N.W. 66TH LANE CORAL SPRINGS FL 33067		% HENRYETTA DORFMAN 5076 N.W. 66TH LANE CORAL SPRINGS FL 33067-2111			Date Incorporated or Qualified 12/03/1985	· · · · · · · · · · · · · · · · · · ·			
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		<del></del>	Applied For	
21		26			59-2623592				
Suite, Apt. #, etc.		Suite, Apt. # otc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State	>	City & State		,		Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip <b>24</b>	Country 25	2(p)	Couni	try		8. This corporation has liability for in Florida Statutes		tax under ] No	s. 199.032,
	9. Name and Address of Curren					10. Name and Address of New Reg	istered A	gent	
DOR	FMAN, HENRYETTA		6	<b>B1</b>	Name				
5076 N.W. 66TH LANE CORAL SPRINGS FL 33067				B2	Street Addr	ddress (P.O. Box Number is Not Acceptable)			
CON	INL SEMMOS EL SSUSI		Ē	83			·····		
			8	34	City		FL	<b>65</b> Zij	o Code
office or n agent. Lai SiGNATURE	to the provisions of Sections 607,050 egistered agent, or both, in the State in familiar with and accept the oblig Signature system make trained regarders as a second control of the c	of Florida, Such change was ations of, Section 607,0505, I	s authorized Florida Statu	by tes.	the corporal	poration submits this statement for the pition's board of directors. I hereby accep	urpose of the appo	changing bintment a	its registered as registered
12.	OFFICERS AN		13.	Agen	r. signature redui	ADDITIONS/CHANGES TO OFFIC		DIRECTO	)BS IN 12
TITLE	DV	DELETE	1.1 TiTu	E		ADDITION OF INTOLO TO OTHE		Change	
NAMÉ	DORFMAN, HOWARD	_	1.2 NAM		ĺ				-
STREET ADORESS	5076 N.W. 66TH LANE	1.3		1.3 STREET ADDRESS					
CITY-ST-ZIP	CORAL SPRINGS FL		1.4 CITY	Y-ST	i-ZIP				
TITLE	DP	DELETE 21		21 TITLE				Change	Addition
NAME	DORFMAN, HENRYETTA		2.2 NAM	Æ					
STREET ADDRESS	5076 N.W. 66TH LANE		2.3 STR	E£1 A	ADDRESS				
CITY - ST - ZIP	CORAL SPRINGS FL		2. 4 CIT	Y-\$1	†-ZIP				
TITLE		- DELETE	3.1 TITL	.E				Change	Addition
NAME			3.2 NAN	AE.					
STREET ADDRESS			•		ADDRESS				
CITY - ST - ZIP		F Lories	3 4 CIT		1-2IP			Char	A alasto -
TITLE		[_] DELETE	4.1 TITL					Change	e L Addition
NAME			4. 2 NA						
STREET ADDRESS			· ·		ADDRESS				
CITY - S1 - ZIP	7 35 35 35 35 35 35 35 35 35 35 35 35 35	DELETE	4.4 CITY		- ZIP			Chance	Addition
THILE		☐ DELETE	5.1 TITL					Change	e L. Addition
NAME			5.2 NAM						
STREET ADDRESS					ADDRESS				
CITY - ST - ZIF		DELETE	5.4 CHY		-ZIP			Change	Ndd#(en
TITLE		☐ DELETE	61 TITL					L. Urlange	Add-tion
NAME			62 NAN						
STREET ADDRESS			63 STR	ktT/	ADDRESS				

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