## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J09812

(5)

THE DISCOUNT PARTY WAREHOUSE, INC.

**APPROVED** ARD FILED

1997 JUL 30 PM 1: 20

SECRETARY OF STATE TALLAMASSEE, FLORIDA



Principal Place	of Business	Mailing Address	illing Address						
13133 N DALE		538 LARKFIELD ROAD							
TAMPA FL 3361	18	EAST NORTHPORT NY 11731				DO MOT INDITE IN THE COMO			
US				2		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified   3a. Date of Last Report			
						04/17/1986	05/01/19		
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		Applied For	
21 14365	N DALE MABKY HYW					58-1717118	<b>CO</b> :	Not Applicable	
Suite, Apt. # 22	F, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		75 Additional e Required	
23 TAM	PA, FL	City & State				6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees			
- <sup>7</sup> タ2 /2	Country	Zip	Cour	ntry		8. This corporation owes or has paid		`	
24 55 6	25 0		30			Personal Property Tax due June 3  10. Name and Address of New Reg		_ ∐ No	
000	9. Name and Address of Current I	registered Agent		81	Name	10. Name and Address of New Reg	istered Agent		
	ECH, ADRIENNE				TTOTAL				
16409 CYPRESS WATERWAY #406 TAMPA FL 33624				82	Street Addre	Address (P.O. Box Number is Not Acceptable)			
IAMPA FL 33024				83					
							·		
			}	84	City		FL B5	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 printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when remstating)  DATE									
12.	Signature, typed or printed name of registered agent of OFFICERS AND		Rogistered	Agen	il signature require	d when reinstalling) ADDITIONS/CHANGES TO OFFICE	DATE OS AND DIDEC	TORS IN 12	
TITLE	VP OFFICERS AND	DELETE	1.1 TO	I F	<del></del>	ADDITIONS/CHANGES TO CITIO	☐ Cha		
NAME	AVIDON, GAIL		1.2 NA						
STREET ADDRESS	22 FAIRWIND CT.			1.3 STREET ADDRESS 1.4 City-St-Zip					
CITY-ST-ZIP						ennanooezeaeo			
TITLE				21 TITLE		_no/nc/g7null phase _nokAddition			
NAME	ROSENBERG, EDWARD	_	2 2 NA	22 NAME		-08/05/97-01/9140-001/4ddition -08/05/97-01/9140-001/4ddition ****165.00 ****165.00			
STREET ADDRESS	10 DONDE LANE		23519	REET A	ADDRESS	www.20.	J. OD - ****	F#100.00	
CITY-ST-ZIP	E. NORTHPORT NY		2 4 CI		l l				
TITLE		DELETÉ		31 TITLE			☐ Cha	nge Addition	
NAME	l :		3.2 NAI	3.2 NAME					
STREET ADDRESS			3.3 STF	REET #	ADDRESS				
CITY-ST-FIP			3.4. Cf	3.4. CITY-ST-ZIP					
TITLE		DELETE	4.1 T)T	LE			☐ Cha	nge Addition	
NAME			4. 2 NA	ME					
STREET ADDRESS			4.3 STF	REET A	ADDRESS				
CITY-ST-ZIP			4.4 CIT	Y-ST	- ZIP				
TITLE	DELETE 5.1		5.1 TIT	5.1 TITLE			Cha	nge 🔲 Addition	
NAME			5.2 NAI	ME	-				
STREET ADDRESS			5.3 STF	REET A	ADDRESS				
CITY-ST-ZIP			5.4 CIT	Y-ST	- Z)P	.,			
TITLE		☐ DELETE	6.1 TIT	LF			☐ Cha	nge	
NAME			62 NAI	ME			ى الم	Bank	
STREET ADDRESS			6.3 STF	REET A	ADDRESS		~ C	1130	
0/7// 07 7/0			0.4.00				,	It.	

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 eath; that it am an officer or director of the corporation or the receiver or trystee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if challed, or on an attrictment with an address.

7/22/97

## (2)

## DISCOUNT PARTY WAREHOUSE

538 LARKHELD ROAD EAST NORTHPORT, NY 11731

JULY 22, 1997

Reference: Profit Corporation Annual Report

Document # J09812

Division of Corporations Annual Reports Section P.O. Box 1500 Tallahassee, FL 32302-1500

Reference the attached and the enclosed check for \$165.00, the annual Profit Corporation Annual Report 1997 is completed and filed for your records.

Please be advised that the only packet received at our office was the 2nd notice and per my conversation with Doug S. of your office, it was advised that payment of \$165.00 be forwarded to complete the requirement for the year of 1997.

Should any additional information be required, please feel free to contact the undersigned and I will comply accordingly.

Thank you for your cooperation in this matter and will be sure that future filings are complied with within the requirement filing dates.

VERY/THULY YOUR

RICHARD DACOSTA

Corporate Controller