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

DOCLL	ME	NT #	12220

Corporation Name DOWNTOWN WAREHOUSE COMPANY, INCORPORATED Principal Place of Business Mailing Address 633 S. FEDERAL HWY P.O. BOX 02-9010 FT. LAUDERDALE FL 33302-9010 **BTH FLOOR** FT. LAUDERDALE FL 33301 3. Date Incorporated or Qualified 3a. Date of Last Report 07/08/1986 01/24/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2693946 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 П Trust Fund Contribution Added to Fees 28 Zip Country Country This corporation has liability for intangible tax under s. 199.032. Yes XNo 24 Florida Statutes 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name MATTEL, HARVEY 633 S. FEDERAL HWY 82 Street Address (P.O. Box Number is Not Acceptable) **EIGHT FLOOR** FT. LAUDERDALE FL 33301 83 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 protect name of experied agrent and the if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. PD DELETE 1.1 TITLE Change Addition TITLE BARNES, PHYLLIS 1.2 NAME NAME 829 SW COCONUT DRIVE STREET ADDRESS 1.3 STREET ADDRESS FT.LAUDERDALE FL 14 City - ST-ZIP C:TY - ST - ZIP DELETE Change ■ Addition 21 TITLE TITLE BARNES, SEFTON NAME 2.2 NAME 829 SW COCONUT DRIVE STREET ADDRESS 2.3 STREET ADDRESS FT.LAUDERDALE FL 2 4 CITY-ST-ZIP CITY-ST-ZIP DELETE ___ Addition Change TITLE 3.1 TITLE MATTELHARVEY K. 3.2 NAME 633 S. FEDERAL HWY., 8TH FL STREET ADDRESS 3 3 STREET ADDRESS FT.LAUDERDALE FL 3.4 OTY-ST-78 CITY-ST-ZIP DELETE Change ☐ Addition THEFE 4 1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST - ZIP ■ Addition DELETE Change 5.1 TITLE TITLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIF DELETE Change Addition TITLE 61 TIFLE NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS 64 CITY - ST- ZIP Cify-ST-ZIP he exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the 14. I do hereby certify that the information supp s filing does

SIGNATURE:

information indicated on this annual report I am an officer or director of the corporal

appears in Block 12 or Block 13 if char-

SIGNATURE AND TYP PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

fon an a

ntal annuativer or trust

tachment

report is trueyans accurate and that my signature shall have the same legal effect as if made under oath; that the impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

FILED

Jan 16 1997 8:00am

Secretary of State

CR2E034