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FILED
May 14 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # K 93456 (7)

1. Corporation Name

FORT LAUDERDALE COLLECTION, INC.

Principal Place of Business

Mailing Address

1616 E SUNRISE BLVD 1616 E SUNRISE BLVD
FT. LAUDERDALE, FL. 33304 FT. LAUDERDALE, FL. 33304

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

06/07/1989

3a. Date of Last Report

02/20/1996

4. FEI Number

65-0124074

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

10. Name and Address of New Registered Agent

81 Name

GORDON, MICHAEL

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

1616 E SUNRISE BLVD

83

84 City

FT. LAUDERDALE

FL

85 Zip Code

33304

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, 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

MICHAEL GORDON

5-9-97

(Signature of agent or director of corporation and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME MICHAEL GORDON
STREET ADDRESS 400 LESLIE DR # 215
CITY-ST-ZIP HALLANDALE, FL 33009

TITLE ☐ DELETE

NAME CINDY GORDON
STREET ADDRESS 400 LESLIE DR # 215
CITY-ST-ZIP HALLANDALE, FL 33009

TITLE ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

NAME ☐ DELETE

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11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

900002190709

-05/27/97--01005--040

***165.00

SIGNATURE:

SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MICHAEL GORDON

PREP

429-97

954 463-1700

Date

Telephone #

CR2E034 (9/16)