## 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

DOCUMENT # M97308

(4)

D & D PROMOTIONS, INC.

FILED
Mar 27 1997 8:00am
Secretary of State



Principal Place of Business	ncipal Place of Sasiness Mailing Address				[			
3250 MARY ST.	3250 MARY ST.							
100								
COCONUT GROVE FL 33133	COCONUT GROVE FL S	331 33-5232						
US	us			3. Date Incorporated or Qualified 09/06/1988		te of Last R <b>9/1996</b>	:eport	
2. Principal Place of Business	2a. Mailing Address		,,	4, FEI Number		Aŗ	oplied For	
1	[26]			65-0072121		No	ot Applicable	
Suite, Apt. #, etc.	Suite, Apt. #. etc.			5. Certificate of Status Desired		\$8.75	Additional	
2	27			8. Certificate of Status Desired	LJ	Fee Re	equired	
City & State	City & Stale			6. Election Campaign Financing			May Be	
3	28			Trust Fund Contribution		Added	to Fees	
Zip Gountry	Zip	Count	У	This corporation has liability for		-	1 <b>9</b> 9.032,	
4    25	29	30			<b>_</b>	No No		
Ti	f Current Registered Agent	8	1 Name	10. Name and Address of New	registered A	.gent		
FREEMAN, LEWIS B		ľ°	i Name					
3250 MARY STREET, #100		8:	2 Street Add	fress (P.O. Box Number is Not Accept	able)			
COCONUT GROVE FL 33133		6:	.,					
		0.	3					
		8	4 City			<b>85</b> Zip	Code	
11. Pursuant to the provisions of Sections					<u> </u>			
Signature specific prints inner of re		<del>_</del>	gent signature requ	uired when reinstaing)	DATE	DIDECTOL	DC IN 10	
BB.	ERS AND DIRECTORS	13.	·····T	ADDITIONS/CHANGES TO OFF	ICERS AND	Change	Addition	
DOTUGTON DON	Ditti	1.2 NAMI	1					
AASA MADV CTREET 4	1100		ET ADDRESS					
COCOMIT ODOVE EL		1.4 CITY						
OUT ST 7H COCONDI GROVE FL	DELETE	2.1 TITLE				Change	Addition	
NAME	-	2.2 NAMI						
STREET ADDRESS		2.3 STRE	ET ADDRESS	•				
CHY-St Z0		2. 4 CITY	·ST-ZIP					
BILE	☐ DELETE	3 1 7171.5				Change	Addition	
NAME		3 2 NAM	E					
\$1866 LADOR: SS		3 3 STRE	et address					
CHY-\$1-Zo		3.4. CiTY						
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STREET ADDRESS			ET ADORESS					
City St Ze	Drift	5.4 CITY				Change	Addition	
TILE	☐ DELETE	6.1 TITLE				∟ ⊓ criαnge	L) Addition	
NAME		6.2 NAM						
STREET ADDRESS			ET ADDRESS					
C/1Y - \$1   ZIF		6.4 CITY	- ST - 21P	die Castina 110 07/07/3. Elecido Ctob			l th o	

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 appears in Block. 12 or Block. 13 if changed, or on an attachment with an address.

SIGNATURE:

THE AND THE OF BRINTED NAME OF SIGNING OFFICER OF PIRECTY

3/8/97 216-420-2775