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

**PROFIT** CORPORATION ANNUAL REPORT

1997



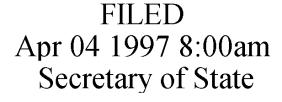
FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9200004432 (0)

DYLAN'S MONEY, INC.



Principal Place of Business Mailing Address  11900 BISCAYNE BOULEVARD  BISCAYNE CENTRE, SUITE 807  MIAMI FL 33181  MIAMI FL 33181-2728								
US		US			3. Date Incorporated or Qualified 11/13/1992 ;	3a, Date 03/15	of Last R	eport
· ·	lace of Business	2a. Mailing Address	***************************************		4. FEI Number		<b>————</b>	oplied For
26     Suite, Apt. #, etc.   Suite, Apt. #, etc.					65-0223116			ot Applicable
(27)					I N Continento di Status Hospitari		Fee Re	Additional equired
City & Stat	f)	City & State			6. Election Campaign Financing		\$5.00	May Be
23		28	· · · · · · · · · · · · · · · · · · ·		Trust Fund Contribution		Added t	to Fees
Ζιρ <b>24</b>	Country 25	7 <sub>1</sub> p	Coun	try	8. This corporation has liability for in Florida Statutes	ntangible ta:		. 199.032,
	9. Name and Address of Cur	rent Registered Agent			10. Name and Address of New Re	gistered Ag	ant	:
	ASER, ALLAN M. (ESQ.		[1	Name				
11900 BISCAYNE BOULEVARD				32 Street Add	ess (P.O. Box Number is Not Acceptable)			
BISCAYNE CENTER, SUITE 807 MIAMI FL 33181				33	<u> </u>			
ITILITY	WHI I E 00101							
			- 1'	B4 City		FL	<b>85</b> Zip i	Code
SIGNATURE		AND DIRECTORS	13.		juired when reinstaling) ADDITIONS/CHANGES TO OFFIC			
HTLE NAME	DP Rosenberg, Myrna	☐ DETELE	1.1 Titl 1.2 Nam	1		L	] Change	Addition
STREET ADORESS	11900 BISCAYNE BOULEV	VAD, SUITE 807		EET ADDRESS				
CITY ST ZIF	MIAMI FL	·	1	/-ST-ZIP				
TITLE	DV	DELETE	2.1 1111	E	——————————————————————————————————————		Change	Addition
NAM?	ROSENBERG, RYAN	NON CHITE ONT	2.2 NA	l l	*			
STREET ADDRESS	11900 BISCAYNE BOULEV	AND, SUITE OUT	Ī	EET ADDRESS				
CHY-S1-Z6*	DS DS	DELETE	2 4 CII	Y-ST-ZIP E			Change	Addition
NAME	SCHWAB, MELISSA	_	3.2 NA	ľ			•	
STREET ADDRESS	11900 BISCAYNE BOULEV	ARD, SUITE 807	3.3 STR	EET ADDRESS				
COY-ST ZP	MIAMI FL			Y-ST-ZIP			La	114700
TITLE	DT LINKSMAN, DARREN	☐ DELETE	4.1 TITU	Ι,		L	J Change	Addition
NAME CONTELLADORES	11900 BISCAYNE BOULEV	ARD, SUITE 807	4. 2 NA	ŀ				
STREET ADDRESS  CITY: \$1:70P	MIAMI FL	2.0, 0011 m 001	1	EET ADDRESS Y-ST-ZIP				
TilleF		DELETE	5 1 TITI				Change	Addition
NAME			52 NAI	l				
STREET ADDRESS			5 3 STR	eet address				
CITY-ST-7a			5.4 CIT	Y - ST - ZIP				
Total		DELETE	6.1 F(T)	.E		L	] Change	Addition
NAMI			6.2 NAI					
STREE! ADDRESS				EET ADDRESS				
CHY - 51 - 29F	l		6.4 CIT	Y-ST-ZIP		<del></del> -		

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 this oprioration or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Brock 12 or Block 12 or Block 12 or Block 12 or Block 13 or on an attachment of the same legal effect as if made under oath; that appears in Block 12 or Block 1

SIGNATURE: