

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Suzanne B. Mortuary
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000009123 (8)

1. Corporation Name

DEBBIE KLEIN, INC.



Principal Place of Business

5425 LAGORCE DRIVE
MIAMI BEACH FL

Mailing Address

5425 LAGORCE DRIVE
MIAMI BEACH FL

2. Principal Place of Business

2a. Mailing Address

21

State, Apt. #, etc.

26

State, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

02/04/1994

3a. Date of Last Report

05/01/1995

4. FEI Number

65-0468291

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

Debbie Klein

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

5425 Lagorce Drive

83

84 City

Miami Beach

FL

85 Zip Code

33140

11. Pursuant to the provisions of Sections 607.07(2)(a) and 607.15(2), Florida Statutes, the above named corporation hereby states 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.07(2)(a), Florida Statutes.

SIGNATURE

Jerry Klein

Jerry Klein

Debbie Klein

Debbie Klein 2/6/96

12. OFFICERS AND DIRECTORS

TITLE	D	[] DELETE
NAME	KLEIN, JERRY	
STREET ADDRESS	5425 LAGORCE DRIVE	
CITY, ST, ZIP	MIAMI BEACH FL	
TITLE	D	[] DELETE
NAME	KLEIN, DEBBIE	
STREET ADDRESS	5425 LAGORCE DRIVE	
CITY, ST, ZIP	MIAMI BEACH FL	
TITLE		[] DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		[] DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		[] DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	[] Change [] Addition
1 NAME	
13 STREET ADDRESS	
14 CITY, ST, ZIP	
2 NAME	
23 STREET ADDRESS	
24 CITY, ST, ZIP	
3 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
4 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
5 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
6 NAME	
63 STREET ADDRESS	
64 CITY, ST, ZIP	

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ym.m.
3-27-96

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and I do not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information included on this annual report or supplemented annual report is true and correct 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 its registered office 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 additional sheet with an address.

SIGNATURE:

Jerry Klein

Jerry Klein

2/6/96 305 8684490

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)