

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT #

1. Corporation Name

P94 000074093

MEMORABILIA LTD INC. #
20449 STATE ROAD 7 A-6
BOCA RATON, FL 33498

Principal Place of Business

Mailing Address

City

FILED
Jun 17 1998 8:00am
Secretary of State

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

1995

4. FEI Number

65-0527248

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 owes or has paid the current year intangible Personal Property Tax due June 30

☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21. Suite, Apt. #, etc.

26. Suite, Apt. #, etc.

22. City & State

27. City & State

23. Zip

Country

28. Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MARK VOGA
1325 S. CONGRESS AVE
SUITE 202

BOCA RATON, FL 33498

81. Name

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

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0602 and 607.1506, 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 607.0606, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and the applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

P

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

TITLE

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STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

PRESIDENT
TODD STAHL
20449 STATE ROAD 7 A-6
BOCA RATON, FL 33498

☐ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I 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:

Todd Stahl, E. PRESIDENT

4/30/98

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0523888

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-06/18/98-01028-023

***150.00