## 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

**FILED** 

May 07 1997 8:00am

Secretary of State

exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the iccurate and that my signature shall have the same legal effect as if made under oath; that execute this report as required by Chapter 607, Florida Statutes; and that my name

DOCUMENT # P9500006991 (0) 1. Corporation Name

I do hereby certify that the information supplied with this filir information indicated on this a nual report or supplemental I am an officer or director of the corporation of the received

DOLLAR & MORE, INC.

Principal Place 2231 N.E. 164 MIAMI FL 3310		Mailing Address 2231 N.E. 164TH STREE MIAMI FL 33160-3703	т		
	•			3. Date Incorporated or Qualified 01/26/1995	3a. Date of Last Report 04/04/1996
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	H -1-	26	,	65-0548615	Not Applicable
		Suite, Apt. #, etc		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	te	City & State		6. Election Campaign Financing	<b>\$5.00</b> May Be
Zip	Country	<b>28</b>	Country	Trust Fund Contribution	Added to Fees
24]	25	29	Gountry 30	8. This corporation has liability for in Florida Statutes	ntangible tax under s. 199.032, Yes D No
	9, Name and Address of Currer	nt Registered Agent	[30]	10. Name and Address of New Re	
GOI	NTE, JAMES M		81 Name		
	1 N.E. 164TH STREET		82 Street	Address (P.O. Box Number is Not Acceptab	lo)
MIA	MI FL 33160				
			83		
			84 City		<b>85</b> 7ip Code
11 Pursuant	to the provisions of Sections 607 000	2 and CO7 1000 Elevido Stat	utes the above served		FL 63 7 10 COSTE
office or r	registered agent, or both, in the State	of Florida, Such change was	authorized by the corp	corporation submits this statement for the poration's board of directors. I hereby accept	urpose of changing its registered of the appointment as registered
i -	am familiar with, and accept the oblig	ations of, Section 607.9505, I	londa Statutes.		
SIGNATURE	Signature, typed or printed name of registered up	ot and title if applicable (Ni	Off Thropstered Agent signature	required when re-distabling)	[)A][
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
TITLE	D	[] DELFTE	11TII({		Change Addition
NAME	GONTE, JAMES M		1.2 NAME		
STREET ADDRESS	2231 N.E. 164TH ST.		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	MIAMI FL 33160	DELETE	1.4 CHY S1-7IP		
NAME			2.1 TOLE 2.2 NAME		Change L Addition
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 City-St-7iP		
TITLE		DELETE	3 1 TITLE		Change Addition
NAME			3.2 NAM;		, ,
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. COY- S1- ZIP		
TITLE		T] DEFEIF	4 1 TILLE	,	Change Addition
NAME			4. 2 NAMŁ		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DOLLETE	4 4 CHY- ST- 7IP		
NAME			5.1 11TLF		Change
STREET ADDRESS			5.2 NAME		
CITY-ST-ZIP			5.3 STRLET ADDRESS 5.4 CITY - ST - ZiP		
TITLE		DELETE	61 THE		Change Addition
NAME			G.2 JAME		
STREET ADDRESS			63 REEL ADDRESS		

r)) does not qualify for the annual report is true and or trustee empowered to