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

PROFIT CORPORATION ANNUAL REPORT 1997



ELORIDA DEPARTMENT OF STAT

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000020549 (8)

D & M COLLECTIBLES, INC.

FILED Apr 17 1997 8:00am Secretary of State

JOHOL BHALL	III od ilo iloka	FRIOI BIIII	H

Principal Place of Business Mailing Address \$510 APRIL RD \$510 APRIL RD.											
MIAMI FL 3315	7	MIAMI FL 33157-8702 US	MIAMI FL 33157-8702								
US		US	US .						e of Last Report 9/1996		
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address			4. FE! Number 65-0566960			applied For Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.				г (والجيدة فاستي	Additional			
22		27			5. Certificate of Status Desired		Feo F	Required			
City & State	e	City & State				6. Election Campaign Financing) Мау Вө		
23		28		,-		Trust Fund Contribution			to Fees		
Zip	Country	Zip	Cou	intry		8. This corporation has liability for	ntangible ta] Yes 🔼 l		s. 199.032,		
24	25 9. Name and Address of Curre	nt Registered Agent	30]	1		Florida Statutes L 10. Name and Address of New Re	· · · · · · · · · · · · · · · · · ·				
UEO	ORAH G. STOTTS	in riegistereo Agent		81	Name			7 11 11.			
) APRIL RD			ļ. <u>.</u> .					,		
	MI FL 33157			82	Street Addre	ess (P.Q. Box Number is Not Acceptat					
tain.	HII 1 E 00107			83							
							Т.	 7	Cedo		
				84	City		FL ľ	85 Zip	Code		
11. Pursuant	to the provisions of Sections 607.056	02 and 607 1508, Florida Stat	ules, the a	DOVE	e-named corp	oration submits this statement for the pon's board of directors. Thereby accept	urpose of ch	anging	its registered		
office or r agent. I a	egistered agent, or both, in the State im familiar with, and accept the oblic	e of Florida. Such change was jations of, Section 607.0505, f	s autnorize ∃or⊧da Sta	a by lutes	/ toe corporati s.	on a board of directors. Thereby accep	it the appoin	mont a	s registered		
SIGNATURE											
	Signature, typed or printed name of register if ag		· · · • · · · · · · · · · · · · · · · ·	d Ago	erc signature require	ed when reinstalling) ADDITIONS/CHANGES TO OFFIC	DATE D	IDECTO	DC IN 10		
12.	OFFICERS AN	ID DIRECTORS DELTE	13. 1.1 Tu	11.5	17	ADDITIONS/CHANGES TO OFFIC		Change			
TITLE NAME	STOTTS, MICHAEL A		1.2 N				_	, onango			
	9510 APRIL ROAD				ADDRESS						
STREET ADDRESS CITY+ST-ZIP	MIAMI FL 33157				31-7IP						
TITLE	VP	Dreete	211		······			Change	Addition		
NAME	STOTTS, DEBORAH G.		22 N	AME							
STREET ADDRESS	9510 APRIL RD.	•	23S	REFT	ADORESS						
CITY-ST-ZIP	MIAMI FL		2 4 0	(1 Y - S	S1-2IP						
TITLE	ST	DECETE	3 1 10	11 F				Change	Addition		
NAME	STOTTS, DEBORAH G.		3.2 N	MV.							
STREET ADDRESS	9510 APRIL RD		3.3 S	HEE T	ADORESS						
CITY-ST-ZIP	MIAMI FL		34 (11Y-3	\$1-7IP			112.	. 👝		
TITLE		[_] DELETE	4.1 11				L.	J Change	Addition		
NAME			4.28								
STREET ADDRESS					ADDRESS						
CITY-\$T-ZIP		DILLIE			51 - ZIP		·] Change	Addition		
TITLE		£'3 btrut	5.1 11				L.	1 onlange	C'1 vooigos		
NAME			5.2 N		ADUBLEC.						
STREET ADDRESS					ADORESS						
CITY-ST-ZIP TITLE		DELLIE	5.4 C 6.1 Tu		51 - ZU'			Change	Addition		
		LJMM	6.2 N								
NAME OTDECT ADDDECS	* .				ADDRESS						
STREET ADDRESS					51-7/P						
CITY-ST-ZIP		حجابرا حبيب إورسوم جبرارد	0.9 €	11.9	21. dr J	7.0000000000000000000000000000000000000		5.56 . at 5			

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 eath; 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 atlachment with an address.

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