

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P95000096834 (3)**

1. Corporation Name

D & M IMPORT EXPORT CORP.



Principal Place of Business

**530 S PARK RD #1126
HOLLYWOOD FL 33021**

Mailing Address

**530 S PARK RD #1126
HOLLYWOOD FL 33021**

2. Principal Place of Business

2a. Mailing Address

21 **530 S PARK RD**

26 **530 S PARK RD**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 **1126**

27 **1126**

City & State

City & State

23 **HOLLYWOOD FL**

28 **HOLLYWOOD FL**

Zip

Zip

Country

Country

24 **33021**

25 **USA**

29 **33021**

30 **USA**

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

12/22/1995

3a. Date of Last Report

N/A

4. FET Number

65-0630788

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

**FURTADO, ROBERTO I
530 S PARK RD #1126
HOLLYWOOD FL 33021**

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 607.0502 and 607.1505, 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent, if applicable

Signature, typed or printed name of new registered agent, if applicable

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **DP** ☐ DELETE
NAME **DE SOUZA, ROBSON C**
STREET ADDRESS **530 S PARK RD #1126**
CITY-STATE-ZIP **HOLLYWOOD FL 33021**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-STATE-ZIP

TITLE **DV** ☐ DELETE
NAME **MARTINS, ANDERSON F**
STREET ADDRESS **530 S PARK RD #1126**
CITY-STATE-ZIP **HOLLYWOOD FL 33021**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-STATE-ZIP

TITLE **DS** ☐ DELETE
NAME **FURTADO, ROBERTO I**
STREET ADDRESS **530 S PARK RD #1126**
CITY-STATE-ZIP **HOLLYWOOD FL 33021**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robson C. de Souza 5/24/96 (305) 986-7118
President

CR2E034 (12/95)