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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600009022 (0)

FLORIDA RARE COINS AND COLLECTIBLES, INC.

Principal Place of Business Mailing Address 4000 HOLLYWOOD BLVD 4000 HOLLYWOOD BLVD HOLLYWOOD FL 33021 HOLLYWOOD FL 33021-6751 3. Date Incorporated or Qualified 3a. Date of Last Report 02/01/1996 2. Principal Place of Business Mailing Address 4, FEI Number Applied For 21 26 Not Applicable Suite Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 30 Florida Statutes 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 KLOSENBERG, F. P. 2117 HOLLYWOOD BLVD 82 Street Address (P.O. Box Number is Not Acceptable) HOLLYWOOD FL 83 City Zip Code R5 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes. Signal ire, typed or pented name of registered agent and title if applicable (NOTE: Registered Agent signature required when rainstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. 96/6) DPS DELETE Change Addition 1.1 TITLE TITLE BOOKSTON, MARTIN NAME 1.2 NAME 8310 PASADENA BLVD 1.3 STREET ADDRESS STEELT ADDRESS PEMBROKE PINES FL OTY-ST-ZP 1.4 CITY-ST-ZIP DELETE Change ___ Addition 2.1 TITLE THE HACKEL, HENRY 22 NAME NAM 80 BROAD ST 2.3 STREET ADDRESS STREET ADDRESS **NEW YORK NY** CITY - ST - ZIP 2.4 CITY-ST-ZIP DELETE ☐ Change ■ Addilion 3.1 TITLE TITLE NAM 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 34 CITY-ST-ZIP CHY \$1-200 DELETE Change 4.1 TITLE Addition 101.6 4. 2 NAME MAME STREET ADORESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-51-20 DELETE Change Addition .TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ACCRESS 5.4 CITY-\$1-ZIP E-TY - \$1 - 2iP DELETE Change Addition 6.1 TITLE Trite NAME 6.2 NAME

> 6.9 STREET ADDRESS 6.4 City-St-ZiP

14. If do hereby cert by that the information supplied with this fiting 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

SIGNATURE:

appears in Block 12 or Block 13

STREET ADDRESS

CHY-ST-ZIP

INDURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/97 954-963-9100

FILED

May 15 1997 8:00am

Secretary of State