

FILED

Mar 19 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P96000095935 (8)			
1. Corporation Name: F & D ENTERPRISES, INC.			
Principal Place of Business: 14201 S.W. 41ST STREET MIRAMAR FL 33027		Mailing Address: 14201 S.W. 41ST STREET MIRAMAR FL 33027-3012	
2. Principal Place of Business:		2a. Mailing Address:	
21. Suite, Apt. #, etc.		26. Suite, Apt. #, etc.	
22. City & State		27. City & State	
23. Zip		28. Zip	
24. Country		29. Country	
3. Name and Address of Current Registered Agent			
GARCIA, DAVID 14201 S.W. 41ST STREET MIRAMAR FL 33027			81. Name
			82. Street Address
			83.
			84. City
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation, office or registered agent, or both, in the State of Florida, Such change was authorized by the corporate agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.			
SIGNATURE			
12. OFFICERS AND DIRECTORS			
13.			
1. TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MORA, FRANK L 7410 N. AUGUSTA DRIVE MIAMI FL 33015	☐ DELETE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	
2. TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GARCIA, DAVID 14201 S.W. 41ST STREET MIRAMAR FL 33027	☐ DELETE 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	
3. TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ DELETE 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	
4. TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ DELETE 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	
5. TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ DELETE 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	
6. TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ DELETE 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	
14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in the information indicated on this annual report or supplemental annual report is true and accurate and that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report and appears in Block 12 or Block 13 if changed, or an attachment with an address.			
SIGNATURE:			
 SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			



CR2E034 (9/96)