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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000098629 (3)

D-D'S GIFT BASKETS, INC.

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

FILED				
Jul 07 1998 8:00am				
Secretary of State				

Principal Plac	ce of Business	Maining Address		
4098 NW 1		3760 NW 172 TERR MIAMI FL 33065		
MINNI TE	2000	MIAMI PL 33035		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				11/17/1997
2. Principal	Place of Business ODN.W. 31AVE	28. Mailing Address 26. 3760 // //	112 ter	4. FEI Number   Applied For   Not Applied by
Suite Ant	# etc	Suite. Apt. #. etc.	110	CR 75 Additional
22 BOOT	HH 23	27		5. Certificate of Status Desired Fee Required
City & Sta	mi Fl	City & State	F.K.	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24 33/	25 6 25 1	29 3305.5	80	Personal Property Tax due June 30.  Yes No
·	9. Name and Address of Currer			10. Name and Address of New Registered Agent
	BANNERMAN, DANA		81 Name	
ADDRAIN ADDRESS A CONTRACT AND A CON				dress (P.O. Box Number is Not Acceptable)
			82 Street Add	iress (P.O. Box Number is Not Acceptable)
•	500+1	1 # 23	63	
	M1 · 1	FL 33056	·	
	1.077	1. 55°°°	84 City	FL 85 Zip Code
11 Pursuant	to the provisions of Sections 607.056	2 and 607 1508 Florida Statutos	the above-named core	
office or	registered agent, or both, in the State	of Florida, Such chango was au	thorized by the corpora	poration submits this statement for the purpose of changing its registered alion's board of directors. I hereby accept the appointment as registered
agent. F			da Statules	1 2/ 00
SIGNATURE	Signature typed or printed frame of registered age	man 4 Jay	Registores Agent signature requ	reduction 6-87-98
12.	OFFICERS AN	· · · · · · · · · · · · · · · · · · ·	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TETLE	D	DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	BANNERMAN, DIANA		1.2 NAME	<del></del> • –
STREET ADDRESS	1000 MM 1000 1000		1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33054		1.4 CITY - ST - ZIP	
TITLE	Will Will TE GOOD T	DELETE	2.1 TITLE	Change Addition
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP			2. 4 CITY-ST-ZIP	
TITLE		OFLETE	3.1 TITLE	Change Addition
NAME			32 NAME	
STREET ADDRESS	}		3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY - ST - ZIP	/
TITLE		DELETE	4.1 HILE	Change Addition
NAME	1 -	and weekly	4 2 NAME	
	1		<b>a</b>	// 7/~
STREET ADDRESS	}		4.3 STREET ADDRESS	T//\ / /
CITY-ST-ZIP	<u></u>		4.4 CITY - ST - ZIP	
TOTAL		ET DELETE	5.17(1).5	T Change / T Addition

CITY-ST-ZIP 6.4 CITY - ST - ZIP 14. Thereby 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 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

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4-29-98

2000025837**9**2 -07/09/98--01010--009

\*\*\*150.00

1.21 6101

Change

Addition