Feb 25, 1999 8:00 am Secretary of State

02-25-1999 90023 017 ***150.00

Addition

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9800094061 1. Corporation Name

MEMORABILIA MARKET, INC.

Principal Place of Business Mailing Address							f 100:100; 100 1010 1011; 0011; 0011; 0011; 0011;	10112 E1E11 GE11G (***************************************	
10097 CLEARY	RI VD.	10097 CLEARY BLVD.					•			
PLANTATION FL 33324 PLANTATION FL 33324					}		<u>_</u> <u>_</u>			
							DO NOT WRITE IN THIS	SPACE		
						3.	Date Incorporated or Qualifed		Ì	
							11/04/1998			
2. Principal P	lace of Business	2a. Mailing Address				4.	FEI Number	· Ap	plied For	
21		26					65-0866486		t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5.	Certificate of Status Desired	\$8.75 A Fee Re		
City 8 Stat		City & State				-	Election Campaign Financing	\$5.00	May Re	
City & State City & State						Trust Fund Contribution	Added to			
Zip			Country		8. This corporation owes the current year Intangible					
24	25 29 30						Personal Property Tax.			
9. Name and Address of Current Registered Agent						10.	Name and Address of New Registered	Agent		
3. Hallo dia Addiose di Baltantingeria				1	Name				-	
HIRSCH, LAWRENCE			82	! :	Street Addres	s (P.O. Box Number is Not Acceptable)				
10097 CLEARY BLVD. PLANTATION FL 33324			83	ı						
I CA	TIANON I E GOOL									
			84	1	City		FL	85 Zip C	Code	
office or re agent. I a	egistered agent, or both, in the State on m familiar with, and accept the obligat	of Florida. Such change was autho- ions of, Section 607.0505, Florida	nzed by Statutes	/ IN6	e corporation	S DO	n submits this statement for the purpose of pard of directors. I hereby accept the appointmentation (Control of the Control of	ntment as reg	gistered	
	Signature, typed or printed name of registered agent		13.	in Si	gnatore required w		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	RS IN 12	
12.	OFFICERS AND		1.1 TITLE	_			ADDITIONS/CHANGES TO OFFICERS AF	☐ Change	Addition	
TITLE	D LIBOOU LAWDENCE	***								
NAME	III (OO) II D (VI IE) (OE		1.2 NAME					ĺ		
STREET ADDRESS	000. 022/11. 02101		1.3 STREET ADDRESS					ļ		
CITY-ST-ZIP	PLANTATION FL 33324		1.4 CITY-S	ST-ZI	IP			Change	Addition	
TITLE	D	_	2.1 TITLE					Cliange		
NAME	HIRSCH, PHYLLIS	i de la companya de	2.2 NAME							
STREET ADDRESS	10097 CLEARY BLVD.			TAD	DORESS					
CITY-ST-ZIP			2. 4 CFTY-ST-ZIP							
TITLE		☐ DEL€TE	3.1 TITLE			,		☐ Change	Addition	
NAME			3 2 NAME				•		1	
STREET ADDRESS			33 STREE		DDRESS					
CITY-ST-ZIP			3.4. CITY-		ZIP		•		- Addition	
TITLE				TITLE				Change	Addition	
NAME			4. 2 NAME							
STREET ADDRESS			4.3 STREE	STREET ADDRESS						
CITY-ST-ZIP				CITY-ST-ZIP						
TITLE			5.1 TITLE					Change	Addition	
NAME			5.2 NAME				·			
STREET ADDRESS			5.3 STREE	TAD	ODRESS					

CITY-ST-ZIP 14. I 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 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, of on an attachment with an address, with all other like empowered.

5.4 CITY-ST-ZIP

6.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

☐ DELETE