

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
Re: ~~FILED~~ 4
85 MAY 17 9:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S69062** (5)
1. Corporation Name
AL'S BASEBALL CARDS, INC.

Principal Place of Business Mailing Address
P. O. BOX 577 DANA FL 33004 P. O. BOX 577 DANA FL 33004

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **07/24/1991** 3a. Date of Last Report **05/01/1994**
4. FEI Number **65-0271325** 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. The corporation has liability for intangible tax under S. 199.032, Florida Statutes: Yes No

2. Principal Place of Business 2a. Mailing Address
21 State, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
24 Zip 25 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent
MUNOZ, ALFONSO
2907 HARBOR LANE
FT LAUDERDALE FL 33312

10. Name and Address of New Registered Agent
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 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office of registration (part of 1995) 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 607.0805, Florida Statutes.

SIGNATURE _____

12. OFFICERS AND DIRECTORS

12a. TITLE	PD
12b. NAME	MUNOZ, ALFONSO
12c. STREET ADDRESS	2907 HARBOR LANE
12d. CITY & STATE	FT. LAUDERDALE FL
12e. TITLE	VD
12f. NAME	MUNOZ, APRIL
12g. STREET ADDRESS	2907 HARBOR LANE
12h. CITY & STATE	FT. LAUDERDALE FL
12i. TITLE	
12j. NAME	
12k. STREET ADDRESS	
12l. CITY & STATE	
12m. TITLE	
12n. NAME	
12o. STREET ADDRESS	
12p. CITY & STATE	

13. ADDITIONS CHANGED TO OFFICERS AND DIRECTORS (12)

13a. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13b. NAME	
13c. STREET ADDRESS	
13d. CITY & STATE	
13e. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13f. NAME	
13g. STREET ADDRESS	
13h. CITY & STATE	
13i. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13j. NAME	
13k. STREET ADDRESS	
13l. CITY & STATE	
13m. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13n. NAME	
13o. STREET ADDRESS	
13p. CITY & STATE	

14. I, the undersigned, certify that the information supplied with this filing is substantially true and correct and that the information indicated on this annual report or supplemental annual report is true and correct 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 liquidator engaged to receive the report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 of this filing, or on an attachment with an address.

SIGNATURE: *April Munoz* Vice President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/13/95 (305) 432-0539