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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V11599
1. Corporation Name
D & L GIFTS & NOVELTIES, INC.

(0)

FILED
Aug 26 1997 8:00am
Secretary of State



Principal Place of Business 6 SPORTSMAN TERR ROTUNDA WEST FL 33947		Mailing Address				1 100/1 011101 11901 11801 07/10 10/18 10/1 010/1 5/2/1 010/1 9/0/1 010/1 0/0/1 10// 			
		6 SPORTSMAN TERRACE ROTONDA WEST FL 33947-1916 US							
US		US				Date Incorporated or Qualified 02/03/1992		of Last Re	eport
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number			plied For	
21		26			65-0312686 Not Applicable			t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75		
22		27	 			Communication of dialates and the communication of		Fee Re	quired
City & Stat	le	City & State			6. Election Campaign Financing	-	\$5.00		
Zip Country		700	Zip Country			Trust Fund Contribution		Added t	
24	h		-	30		8. This corporation has liability to Florida Statutes	r intangible t Yes		199.032,
[24]	9. Name and Address of Curre		1301	T		10. Name and Address of New F			
CUB	MS, DOUGLAS			81	Name				
	PORTSMAN TERR		100 0000			dress (D.O. Davikhumbas is Not Assembly)			
	UNDA WEST FL 33947			82	Street Ad	ldress (P.O. Box Number is Not Accept	able)		
				83					
	•					· · · · · · · · · · · · · · · · · · ·			Code
	;			84	City		FL	85 Zip (Joue
11. Pursuant	to the provisions of Sections 607.05	02 and 607 1508, Florida State	utes, the a	above	e-named co	orporation submits this statement for the ration's board of directors. I hereby acc	purpose of a	changing it	s registered
agent. I a	am familiar with, and accept the oblig	gations of, Section 607.0505, F	Florida Sta	atutos	ine corpor i.	ration's board of directors. Thereby acc	epi ine appo	HALINGIA GS	registered
SIGNATURE	•								
12.	Signature, typed or printed name of registered a		OTE: Register		nt signature rec	quired when reinstating) ADDITIONS/CHANGES TO OFF	DATE ICEDS AND	DIDECTOR	R IN 12
TITLE	OFFICERS AND DIRECTORS DELETE			1.1 TOLE		ADDITIONS/CITAINGES TO OF		Change	Addition
NAME	CURTIS, DOUGLAS		- 6	1.2 NAME			•		
STREET ADDRESS	6 SPORTSMAN TERR			1.3 STREET ADDRESS					
CITY-ST-ZIP	ROTUNDA WEST FL			1.4 CITY - ST- ZIP					
TITLE	VS DELETE			TITLE				Change	Addition
NAME	CURTIS, CLAUDETTE E.		2.2 !	NAME					
STREET ADDRESS	6 SPORTSMAN TERR		2.3 5	STREET	ADDRESS				
CITY-ST-ZIP	ROTONDA WEST FL		2.4	CITY-S	ST-ZIP				
TITLE		☐ DELETE	3.1 7	FITLE			ĺ	Change	Addition
NAME			3.21	NAME					
STREET ADDRESS					ADDRE\$S				
CITY-ST-ZIP		T ou ere		CITY-5	ST-ZIP			Chessa	Antalistan
TITLE		DELETE	- 1	TITLE			ı	Change	☐ Addition
NAME				NAME	I DODGE OF				
STREET ADDRESS			1		ADDRESS				
CITY-ST-ZIP TITLE		DELETE		CITY-S TITLE	I-ZIP			Change	☐ Addition
NAME		La Steerie	•	NAME			'		
STREET ADDRESS			1		ADDRESS			PE. 26	
CITY-ST-ZIP			- 1	CHTY-S				v 06	
TITLE		DELETE		TITLE				Change	Addition
NAME			6.2 1	NAME		20000221 -08/28/97010 ***550.00	7,94,2	[2	
STREET ADDRESS					ADDRESS	-08/28/97010	J25U1	ſ	
l	1				[***550.00			

14. I do 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 conforation or the receiver or flustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if thanked, or on an all aeth tent with an address.

and a marker of