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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Şandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 308472

(0)

VELVET CREME INC

NAME

TITLE

NAME

TITLE NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY ST-ZIP

FILED May 04 1998 8:00am Secretary of State

Change

Change

Change

Addition

Addition

Addition

- 18418 1811 1841 1841 1841 1860 1860 1841 1861 1861 1861 1861

								-}	קוש אותוק ועור מינסקו אועוע אונעו אעוסם וווווג עמוסטו ו	AR BABA (1801) BAR	HI dibili kadi	
Principal Place of Business Mailing Address												
3301 SW 8TH				3301 SW 8TH STREET MIAMI FL 33135								
MIAMI FL 331	135		MIAMI FL 33135				DO NOT WRITE IN THIS SPACE					
								3.	Date Incorporated or Qualified			
								1	08/25/1966)
2. Principal P	lace of Busin	ness	2a. Mailing	2a. Mailing Address				4.	FEI Number	A	polied For	,—-
21			26	26				1	59-1153805	/ N	ot Applica	able
Suite, Apt.	#, etc.			Suite, Apt. #, etc.				1_			Additional	
22			27	27				5.	Certificate of Status Desired	Fee R	equired	
City & Stat	6		City &	City & State				6.	Election Campaign Financing	\$5.00	May Be	\neg
23			28	28				Trust Fund Contribution Added to				
Zip	Country Zip			Country			8. This corporation owes or has paid the current year Intangible					
24		25	29		30				. a day a da		□No	
g. Name and Address of Current Registered Agent								10.	Name and Address of New Registered	Agent		
MERKIN, STEWART A., ESQ. 444 BRICKELL AVE RIVBERGATE PLAZA STE300 MIAMI FL 33131						81	Name					1
						82	Street Addre	ress (P.O. Box Number is Not Acceptable)				
							Oli Oct Picare	1683 (F.O. BOX NUMBER IS NOT ACCEPTABLE)				
						83						
						84	City			85 Zip	Code	\dashv
							Ony		Fl	_ 00 2,5	2000	ľ
11. Pursuant	to the provis	ions of Sections 607.0	502 and 607.1508	Florida Statu	tes, the a	bove	named corpo	oratio	on submits this statement for the purpose board of directors. I hereby accept the ap	of changing i	ts register	ed
agent. La	registered ag ım fam iliar wi	th, and accept the ob-	ligations of, Sectio	i change was n 607.0505, Fl	autriorize Iorida Sta	a by tutes	tne corporation.	onst	board of directors. I hereby accept the ap	pointment as	registere	۱
SIGNATURE		•										- 1
L	Signature, typed	or printed name of togistared	agont and title if upplicab	in (NO	Tt. Registere	d Age	nt signaturo require	d when	n reinstating) DATE			}
12. OFFICERS AND DIRECTORS								/	ADDITIONS/CHANGES TO OFFICERS AN			
TITLE	PD			■ DELETE	1.1 1	TLE	ļ			Change	☐ Addi	lion
NAME		I, GARY S. V 8TH ST			1,2 N	AME						ı
STREET ADDRESS		1.3 STREE			ADDRESS					ľ		
CITY-ST-ZIP	MIAMIF	L			140	ITY-S	T-ZIP]
TITLE	VST			DELETE	21 I	TLE				Change	☐ Add	tion
NAME HADLER, KATHERINE T.					2.2 N	2.2 NAME						
STREET ADDRESS	3301 SV		2.3 \$			3 STREET ADDRESS)	
CITY-ST-ZIP MIAMI FL					2.40	2. 4 City-St-ZiP						Ī
TITLE				DELETE	311					Change	Addi	tion

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 suppliemental 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 or on an attachment with an address.

3.2 NAME

4.1 TITLE

4. 2 NAME 4.3 STRÉET ADDRESS

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

3.3 STREET ADDRESS

3.4. CITY - ST - ZIP

4.4 CITY - ST - ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

5.4 CITY - ST - ZIP

305-445-1467 111-11/94