

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # 404118 1. Entity Name BETTY DAIN, CREATIONS, INC.	
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Principal Place of Business 3300 N.W. 110 ST MIAMI, FL 33167	Mailing Address 3300 N.W. 110 ST MIAMI, FL 33167
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DO NOT WRITE IN THIS SPACE



04042006 No Chg-P CRZE034 (11/05)

4. FEI Number 13-1541407	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**LEEBOW, GERALD
3300 N.W. 110 ST.
MIAMI, FL 33167**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

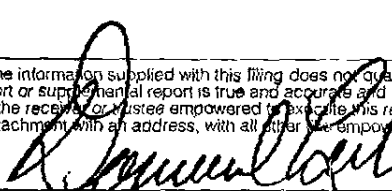
SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	U000000528597 05/05/06-80083-015 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DTS LEEBOW, HARRIET 3300 N.W. 110 ST MIAMI, FL 33167
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD LEEBOW, RICHARD 3300 N.W. 110 ST MIAMI, FL 33167
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD LEEBOW, GERALD 3300 N.W. 110 ST MIAMI, FL 33167
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD LEEBOW, DONALD M 3300 N.W. 110 ST MIAMI, FL 33167
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other fee empowered.

SIGNATURE:  **DONALD LEEBOW** **4-21-06 305-769-3451**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #