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

(0)

DOCUMENT # M87028
1. Corporation Name:
CRAFTIQUE SALES INC.

FILED
Mar 24 1997 8:00am
Secretary of State

984-433-2073

Principal Place of Business Mailing Address							
							BBA CAPITAL I
LAKE PARK FL	33403						
US		US				3. Date Incorporated or Qualified	3a. Date of Last Report
						06/20/1988	05/01/1996
2. Principal Pl	lace of Business	2a. Mailin	g Address			4. FEI Number	Applied For
21		26				65-0069904	Not Applicable
Suite Apt	# etc.	Suite	Apt. #. etc.			5. Certificate of Status Desired	\$8.75 Additional
22		27				b. Cerandate of Status Desired	Fee Required
City & State	9	City &	City & State			Election Campaign Financing \$5.00 May Be	
23		28				Trust Fund Contribution	Added to Fees
Z(j)	Country	Z.p		Country	1	8. This corporation has liability for	
24	25 29 30 9. Name and Address of Current Registered Agent		0		Florida Statutes Yes No		
	The second secon	nt Hegistered A	Agent	61	Name	10. Name and Address of New Re	gistered Agent
	E, MICHELLE				Ivanie		
	91 NW 1 STREET			62	Street Ad	dress (P.O. Box Number is Not Acceptab	ole)
PEM	IBROKE PINES FL 33028						
				83			
				84	City		85 Zip Code
maan see iss		z			<u> </u>		FL S EN COOK
Office or re	egistered agent, or both, in the State	⊱of Florida, Suc	:h change was aut	horized by	y the corpor	rporation submits this statement for the pation's board of directors. I hereby accel	ourpose of changing its registered
agent. Lar	in familiar with, and accept the oblig	ations of, Section	on 607.0505, Florid	da Statutes	s.	,	-,,
SIGNATURE							
12.	Separation of the property of the particular of the property o	ing and bille trapolets ID DIRECTORS	Die (RVCTE: F	13.	ent signature ren	julred when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE PERS AND DIRECTORS IN 12
THU]	D		DELETE.	1.1 TITLE		ABBITTOTO, OF PARTIES TO CITTO	Change Addition
NAME	GINE, MICHELLE			1.2 NAME			
STREET ACTORESS	16291 NW 1 STREET			13 STREFT	ADDRESS		
CHTY ST 702	PEMBROKE PINES FL			1.4 CITY - S			
)HU		······································	DELETE	21 TITLE	,,,,,,		Change Addition
NAME				2.2 NAME	İ		
STREET ASIDRESS				23 STREET	LADUBESS		
CHY SI-7-				2 4 CITY - 5			
Tallf			DELETE	31 TITLE	51-511		Change Addition
NAME				3 2 NAME			
STREET AUDRESS				33 STREET	ADDRESS		
CPM-SE-ZiP				3.4 CITY-5			
Tifful			DELETE.	4.1 TITLE			Change Addition
NAME				4.2 NAME			-
STREET ADORESS				43 STREET	ADDRESS		
CITY (\$1 - ZiP)				4.4 CITY-S			
180			DELETE	5171711			Change Addition
NAME				5.2 NAME			-
STREET ADDRESS				5.3 STREET	ADDRESS		
G17Y+51+769				5 4 CITY - S	ŧ		
THE	W 4 4		DELETE	6 1 TITLE			Change Addition
NAME				6.2 NAME	1		• • • • • • • • • • • • • • • • • • • •
STREET ADDRESS (6.3 STREET	ADDRESS		

14. I do hereby certly that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, Efurther 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 applies in Brock 1260 Blazer 13 of the annual or on an affiliation with \$\text{and drivers}\$.