SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name P93000012611 (8)

GRANDE' CREATIONS CORPORATION

FILED Aug 13 1998 8:00am Secretary of State



Principal Plac	e of Bus iness	Mailing Add	ress				
1607 MEADOW	S LANE, N.E.	1607 MEADOWS LANE, N.E. WINTER HAVEN FL 33883					
WINTER HAVE	N FL 3388 3					DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified	
						02/12/1993	
2. Principal Place of Business 2a. Mailing Address						4. FEI Number Applied For	
21		26				59-3166149 Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				S8 75 Additional	
22		27				5. Certificate of Status Desired Fee Required	
City & Stat	le	City & S	tate		· · ·	6. Election Campaign Financing \$5.00 May Be	
23		28				Trust Fund Contribution Added to Fees	
Zip	Country	Zip		Coun	try	8. This corporation owes or has paid the current year Intangible	
24	25	29		30		Personal Property Tax due June 30. Yes No	
	9. Name and Address of Curr	ent Registered Age	ent			10. Name and Address of New Registered Agent	
SAM	IMONS, ROBERT O			ŧ	1 Name		
	6 6TH STREET, S.E.				2 Street Ad	ddress (P.O. Box Number is Not Acceptable)	
	TER HAVEN FL 33880				2 01100171	dulidas (1.5. Box Hallibot to Hot Hoophable)	
				Ĩ	13	·	
				1	14 City	FI 85 Zip Code	
11. Pursuan	to the provisions of sections 607.05	502 and 607.1508, F	lorida Statute	s, the abov	/e-named cor	• • I	
office or agent. I	registered agent, by both, in the Sta am familiar with, and accept the obl	ite of Florida. Such (ligations of, section)	change was a 607.0505. Fic	uthorized rida Statu	by the corpor les.	poration submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered	
SIGNATURE	(14/4/4/1)	3				JULY 31 1981	
SIGNATURE	Signature, typed or printed-prine of registered a	gent and title if applicable	(NC	TE: Registere	Agent signature	required when reinstating) DATE	
12.	OFFICERS A	AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D		DELETE	1.1 TITU		Change Addition	
NAME	AVIS, DEREK R			1.2 NAM	E		
STREET ADDRESS	1607 MEADOW LANE, N.E.			1.3 STRE	ET ADDRESS		
CITY-ST-ZIP	WINTER HAVEN FL 33883			1.4 CITY	ST-ZIP		
TITLE			DELETE	2.1 TiTU		Change Addition	
NAME				2.2 NAM	E		
STREET ADDRESS				2.3 STRE	ET ADDRESS		
CITY-ST-ZIP				2.4 CITY	ST-ZIP		
TITLE			DELETE	3.1 TITL		Change Addition	
NAME				3.2 NAM	E		
STREET ADDRESS				3.3 \$TRE	ET ADDRESS		
CITY-ST-ZIP				3.4 CITY	-ST-ZIP		
TITLE		_ · · · · · · · · · · · · · · · · · · ·	DELETE	4.1 TITU		Change Addition	
NAME		_		4.2 NAM	E		
STREET ADDRESS				4.3 STRE	ET ADDRESS		
CITY-ST-ZIP				4.4 CITY			
TITLE			DELETE	5.1 TITLE		Change Addition	
NAME		t		5.2 NAM		Change C Addition	
STREET ADDRESS					ET ADDRESS		
CITY-ST-ZIP				5.4 CITY	1		
TITLE		··	DELETE	6.1 TITLI		Change Addition	
		Ĺ.	DELETE	6.2 NAM		L_J Change L_J Addition	
NAME OTOEST ADDRESS				- E			
STREET ADDRESS				•	ET ADDRESS		
CITY-ST-ZIP				6.4 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 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

DI OLIDEREK