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Feb 02 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000014231 (3)

1. Corporation Name

HEIRLOOM CREATIONS, INC.



Principal Place of Business

10209 SOUTHERN BLVD
ROYAL PALM BEACH FL 33411
US

Mailing Address

10209 SOUTHERN BLVD
ROYAL PALM BEACH FL 33411
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/25/1993

4. FEI Number

65-0390711

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

10. Name and Address of New Registered Agent

SHOEMAKER, MARY E
10209 SOUTHERN BLVD
ROYAL PALM BEACH FL 33411

81 Name

82 Street Address (P.O. Box Number Is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1509, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Mary E Shoemaker

(NOTE: Registered Agent signature required when re-registering)

1/20/98

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME SHOEMAKER, MARY E
STREET ADDRESS 13394 N UMBERLAND CIR
CITY-ST-ZIP WEST PALM BEACH FL 33414

TITLE ☐ DELETE

NAME KERNS, EILEEN A
STREET ADDRESS 1001 ISLAND MANOR DR
CITY-ST-ZIP GREEN ACRES CITY FL 33413

TITLE ☐ DELETE

NAME KERNS, KENNETH
STREET ADDRESS 1001 ISLAND MANOR DR
CITY-ST-ZIP GREEN ACRES CITY FL 33413

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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.

SIGNATURE:

Mary E Shoemaker
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARY SHOEMAKER

1/20/98 561-191-0120
Date Daytime Phone # 0548227

CR2E034 (10/97)