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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000022217 (2)

## **COLOURS INTERNATIONAL CORPORATION**

## **FILED** Mar 31 1998 8:00am Secretary of State



Principal Place of Business Mailing Address											A LIGHT HOUSE FOOL	
55 W 36TH PL 55 W 36TI												
HIALEAH FL 33012				HIALEAH FL 93012					DO NOT MIDITE IN THIS SPACE			
									DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified			
2. Principal Place of Business				2a. Mailing Address					03/25/1993 4. FEI Number		Applied For	
			- 1	H-1					65-0398305	<del>- 1</del>	Not Applicable	
Suite, Apt. #, etc.				Suite, Apt. #, etc.							5 Additional	
22				27					5. Certificate of Status Desired		Required	
City & State			1 - 1	City & State					6. Election Campaign Financing	\$5.0	00 May Be	
23			28	28					Trust Fund Contribution		ed to Fees	
Zip Country				Zip Country					8. This corporation owes or has paid the current year Intangible			
24	25		29	29 30					Personal Property Tax due June 30. 🔼 Yes 🔲 No			
	9, Name	and Address of Curren	t Regi	stered A	gent		L.,		10. Name and Address of New Registe	red Agent		
SAN JUAN, GLADYS							81	Name				
55 W 36TH PL							82	Street Add	dress (P.O. Box Number is Not Acceptable)			
HIALEAH FL 33012												
	_						83				Ī	
							84	City		85 Z	ip Code	
								•		┡┖╸╵		
office or re	edistered acc	ons of Sections 607.050 ent, or both, in the State h, and accept the oblig	of Flori	ida. Such	i chang <b>e w</b> as	authorize	ed by	the corpora	rporation submits this statement for the purpo ation's board of directors. I hereby accept the	se of changing appointment	g its registered as registered	
SIGNATURE		or, and accept the care		,								
Signature, typed or printed name of registered agent and little if applicable (NOTE: Registe							ed Age	per erufangia In		TE		
12.		OFFICERS AN	D DIRE	CTORS		13.			ADDITIONS/CHANGES TO OFFICERS			
TITLE	D	<b>.</b>			DELETE	1,1 1	ITLE			☐ Chang	ge L. Addition	
NAME		an, gladys					IAME				l l	
STREET ADDRESS 55 W 36TH PL				1.3 S			TREET	ADDRESS			.	
CITY-ST-ZIP	HIALEA	1 FL 33012			DECETE	_	ITY-S	T-ZIP		Chang	ne Addition	
TITLE	V	140011511115			DELETE	2.1 1				C. Ondrig	je C Addition	
NAME		EZ, JACQUELINE				2.21						
STREET ADDRESS		W 66TH PLACE						ADDRESS				
CITY-ST-ZIP	MIAMI F	<u> </u>			DELETE	3.1		ST - ZIP		Chang	ne Addition	
TITLE					☐ DEFERE	3.1				و در در در		
NAME								ADDRESS				
STREET ADDRESS							-	·				
CITY-ST-ZIP TITLE	<del> </del>			<del></del>	DELETE	_	TITLE	ST-ZIP		☐ Chang	ge Addition	
NAME						1	NAME				j	
STREET ADDRESS						1		ADDRESS				
CITY-ST-ZIP							ITY-S					
TITLE					DELETE	5.11				☐ Chang	e Addition	
NAME							IAME				ţ	
STREET ADDRESS								ADDRESS	**		ĺ	
CITY-ST-ZIP							ITY-S	-	, * <b>s</b> or			
TITLE					DELETE	6.1				☐ Chang	ge Addition	
NAME						6.2	IAME				•	
STREET ADDRESS						6.3	TREET	ADDRESS			ĺ	
CITY - ST - 7IP						6.4	ITY-S	IT-ZIP				
14 I bereby o	certify that the	information supplied w	vith this	filina do	es not qualify	for the ex	emp	tion stated i	in Section 119.07(3)(i), Florida Statutes. I furth	er certify that	the information	

indicated on this annual report or supplied with this limit does not quality for the exemption stated in deciding 119.07(3)(f), Florida Statutes. Further carry 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 507, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

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