SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996 DOCUMENT #

P94000006758 (4)
IMITED, INC.

96-98
CM

RE-LEAF DESIGNS LIMITED, INC.

FILED 96 SEP 16 PH 12: 41 SECRETARY OF STATE TALLAHASSEE, FLORIDA



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11353 LAKEVIEW DRIVE CORAL SPRINGS FL 33071			11353 LAKE CORAL SPR	11353 LAKEVIEW DRIVE CORAL SPRINGS FL 33071						
							3. Date Incorporated or Qualified	3a. Date	e of Last Report	
2. Principal P	Place of Busin	ess	2a Mailing Ac	2a. Mailing Address			01/19/1994	06/	20/1995	
21			26	rui cas			4. FEI Number		Applied For	
Suite, Apt	#, etc.		Suite, Apt	#, etc.			65-0459511		Not Applicable	
22			27	,			5. Certificate of Status Desired		\$8.75 Additional Fee Required	
City & State	е		City & Stat	.e			6. Election Campaign Financing			
23		·····	28				Trust Fund Contribution		\$5.00 May Be Added to Fees	
Z _i p		Country	Zip		Cou	ntry	8. This corporation has liability for	intangible ta		
24	O Name	25 and Address of Course	29	<u> </u>	30		Florida Statutes	Yes 🗍	No	
		and Address of Curre	nt Registered Agent	<u> </u>		81 Name	10. Name and Address of New Re	gistered Ag	ent	
	udger, r					81 Name				
11	1353 LAKE	/IEW DRIVE		82		82 Street Add	eet Address (P.O. Box Number is Not Acceptable)			
C	oral spri	NGS FL 33071				83		, , , , , , , , , , , , , , , , , , ,		
						63				
						84 City			85 Zip Code	
11, Pursuant t	to the provisi	ons of Sections 607.050	12 and 607 1509 51-	rida Chabata			poration submits this statement for the pr	<u> </u>	. '	
office or re agent. I ar	egistered ag m familiar wi	ent, or both lin the State h, and accept the oblig	of Florida, Such cha ations of, Section 60;	rigė was au 7.0505, Flori	thor zed ida Statu	by the corporation	poration submits this statement for the pricon's board of directors. I hereby accept	urpose of cha t the appoint	anging its registered nent as registered	
SIGNATURE -	Stonature typed	or printed name of registered age	est on tall. I am look		·					
2.			ID DIRECTORS	(NOTE	Hitgistered	Agent signature requ	red when renstating)	(ba,F		
TITLE	PD			DELETE	11 Til	IF.	ADDITIONS/CHANGES TO OFFIC	ERS AND D		
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STREET ADDRESS		AKEVIEW DRIVE				REET ADDRESS				
CITY - ST - ZIP	CORAL	SPRINGS FL 33071				Y - ST - ZIF				
TITLE				DELETE	21 111				Change Addition	
ussec					2 2 NA			Ц	Change Addition	
MAMIL						1				
					23576	IFFT ADDRESS				
NAME STREET ADDRESS CITY - ST - ZIP						EET ADDRESS				
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STREET ADDRESS DITY - ST - ZIP VITLE LAME STREET ADDRESS DITY - ST - ZIP				DELETE	2 4 CIT 3 1 TITU 3 2 NAM 3 3 STM	Y-ST-ZIP E ML	-10/01/	96Ull	<u>Comp Ll</u> Adwor 37-U12 ***375.UU	
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