

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED
AND
FILED

CORPORATION
ANNUAL REPORT
1995



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

95 MAY -1 AM 9:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000085041 (9)

1. Corporation Name

JEFFREY'S VIVID CREATIONS, INC

Principal Place of Business

22213 S.W. 97TH COURT
MIAMI FL 33190

Mailing Address

22213 S.W. 97TH COURT
MIAMI FL 33190

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12/01/1994

3a. Date of Last Report

2. Principal Place of Business

21 12532 S.W. 128 ST.

Suite, Apt. #, etc

22

City & State

23 MIAMI, FL 33186

Zip

24 33186

Country
25 DADE

2a. Mailing Address

26 12532 S.W. 128 ST.

Suite, Apt. #, etc

27

City & State

28 MIAMI, FL 33186

Zip

29 33186

Country
30 DADE

4. FEI Number

65-0553671

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

REYES, JEFFREY J
22213 S.W. 97TH COURT
MIAMI FL 33190

10. Name and Address of New Registered Agent

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 607.1508, 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

Signature (typed or printed name of registered agent and the filer is acceptable)

NOTE: Only direct Agent signature required when registering

(DATE)

12. OFFICERS AND DIRECTORS

TITLE President
NAME Jeffrey J. Reyes
STREET ADDRESS 22213 S.W. 97 Court
CITY, ST, ZIP Miami, FL 33190

TITLE Sec. Treasurer
NAME Ysmary C. Reyes
STREET ADDRESS 22213 S.W. 97 CT.
CITY, ST, ZIP Miami, FL 33190

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 110.07(3)(b), 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:

Ysmary C. Reyes Sec. Treasurer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/95 305-235-5928
Date Registered Agent