

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

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Suzanne B. Martinez  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P95000013979 (6)**

1. Corporation Name  
**CANARY CREATIONS, INC.**



Principal Place of Business

1400 WEST 23RD STREET  
MIAMI BEACH FL 33140

Main Office

1400 WEST 23RD STREET  
MIAMI BEACH FL 33140

2. Principal Place of Business

2a. Mailing Address

21 1160 Falcon Avenue  
22 City & State  
23 Miami Springs, FL  
24 33166 25 U.S.A.

26 1160 Falcon Avenue  
27 City & State  
28 Miami Springs, FL  
29 33166 30 U.S.A.

g. Name and Address of Current Registered Agent

CANARY, DANIEL  
1400 WEST 23RD STREET  
MIAMI BEACH FL 33140

3. Date Incorporated or Chartered  
**02/17/1995**

3a. Date of Last Report

4. FEIN Number  
**65-0567197**

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

10. Name and Address of New Registered Agent

81 Name  
**Canary, Daniel**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**1160 Falcon Avenue**  
83  
84 City  
**Miami Springs** 85 Zip Code  
**FL 33166**

11. Pursuant to the provisions of Sections 607.01 and 607.13 of the Florida Statutes, the undersigned corporation hereby certifies that the information furnished for the purpose of changing its registered office or principal place of business, or both, in the State of Florida, is true and correct, and that the corporation is based in Florida, and that the undersigned is a resident of Florida, and that the undersigned is the duly authorized officer or director of the corporation.

SIGNATURE

*Daniel D. Canary*  
4/8/96

12. OFFICERS AND DIRECTORS

12.1	PTD	<input checked="" type="checkbox"/>
NAME	CANARY, DANIEL D	
STREET ADDRESS	1400 WEST 23RD STREET	
CITY, STATE	MIAMI BEACH FL 33140	
12.2	SD	<input checked="" type="checkbox"/>
NAME	LIBOY, LORNA E	
STREET ADDRESS	1400 WEST 23RD STREET	
CITY, STATE	MIAMI BEACH FL 33140	
12.3		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY, STATE		
12.4		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY, STATE		
12.5		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY, STATE		
12.6		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY, STATE		
12.7		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY, STATE		
12.8		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY, STATE		
12.9		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY, STATE		
12.10		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY, STATE		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1	PTD	<input checked="" type="checkbox"/>	Change	<input type="checkbox"/>	Addition
NAME	Canary, Daniel D				
STREET ADDRESS	1160 Falcon Avenue				
CITY, STATE	Miami Springs, FL 33166				
13.2	SD	<input checked="" type="checkbox"/>	Change	<input type="checkbox"/>	Addition
NAME	Liboy, Lorna E				
STREET ADDRESS	1160 Falcon Avenue				
CITY, STATE	Miami Springs, FL 33166				
13.3		<input type="checkbox"/>	Change	<input type="checkbox"/>	Addition
NAME					
STREET ADDRESS					
CITY, STATE					
13.4		<input type="checkbox"/>	Change	<input type="checkbox"/>	Addition
NAME					
STREET ADDRESS					
CITY, STATE					
13.5		<input type="checkbox"/>	Change	<input type="checkbox"/>	Addition
NAME					
STREET ADDRESS					
CITY, STATE					
13.6		<input type="checkbox"/>	Change	<input type="checkbox"/>	Addition
NAME					
STREET ADDRESS					
CITY, STATE					

14. I do hereby certify that the information supplied in this form is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information contained on this report is true and correct, and that my signature shall have the same legal effect as if made in person. I am an officer or director of the corporation and the information is provided to comply with the requirements of Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or in an attached form with an address.

SIGNATURE:

*Daniel D. Canary*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/8/96 305-885-1234

CR2E034 (12/95)