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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000017275 (5)

TAKARA KREATIONS, INC.

Principal Place of Business

105 E PALMETTO PARK RD. 2

Mailing Address

105 E PALMETTO PARK RD. 2 BOGA RATON FL 33432-4818

FILED May 15 1997 8:00am Secretary of State



BOCA RATON FL 33432		BOCA RATON FL 33432-4818						
					3. Date Incorporated or Qualified 03/02/1995		e of Las 1/199	t Report
	lace of Business	2a. Mailing Address			4. FEI Number			Applied For
21 271 NE 26 STREET 26 271 NE 26				<u> </u>	65-0588928			Not Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired See Require			
City & State 23 BOCA	RATION, FLORIDA	City & State 28 BOCA (LATON)	FLOR		Election Campaign Financing Trust Fund Contribution			00 May Be ed to Fees
Zip 24 3343			Country 30 \	SA		Yes 🖳	No	er s. 199.032.
	g. Name and Address of Curre	nt Registered Agent		·	10. Name and Address of New Rec	platered A	gent	
	NN, WILLIAM F		81	Name				
105 E PALMETTO PARK RD, 2				Street Add	ress (P.O. Box Number is Not Acceptable	le)		
BOO	CA RATON FL 33432		<u> </u>	ļ				
			83					
			84	City		FL	65 Z	ip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Perida Statute	s, the abov	e-named corp	poration submits this statement for the pi	urpose of o	changin	g its registered
	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such dhànge was a pations of, Section 07.0505, Flor	Ohorized b da Statute	y the corporal s.	poration submits this statement for the pi tion's board of directors. I hereby accep	t the appo	ointment	as registered
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable. {NDTE		ent algnature raqui	red when reinstating)	DATE	than .	<u> </u>
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	ERS AND		
TITLE	D	☐ DELETE	1.1 TITLE	· · · · · · · · · · · · · · · · · · ·		i	Chan	ge Addition
NAME	QUINN, WILLIAM F		1.2 NAME					
STREET ADDRESS	271 NE 26TH ST		1.3 STREE	T ADDRESS				
CHY-ST-ZIP	BOCA RATON FL 33431		1.4 CITY -	ST-ZIP				
TITLE	D	DELETE	2.1 TITLE			L	Chan	ge [Addition
NAME :	QUINN, LAUREN K		2.2 NAME	.				
STREET ADDRESS	271 NE 28TH ST		2.3 STREE	T ADDRESS	•	•		
CITY - ST - ZIP	BOCA RATON FL 33431	T prietr	2. 4 CITY-	ST-ZIP			100	
TOLE		☐ DELETE	3.1 TITLE			ι	Chan-	ge Addition
NAMÉ			3.2 NAME					
STREET ADDRESS				AODRESS				
CITY - ST- ZIP		DELETE	3.4. CITY-	ST-ZIP	The second secon		Chan	ge Addition
TOTUE		Las occur	4.1 TITLE	}				Re TT NOGHIOI
NAME			4. 2 NAME			^		
STREET ADDRESS				ADDRESS	112.	()		
CITY-SI-ZIP TILLE		DELETE	4.4 CITY- 5.1 TITLE	51-ZIP		^	Chan	pe Addition
		En occur			W. K.		VIIdil L	
NAME STOCET ADODESS			5.2 NAME	t apposes	`(,/`'			
STREET ADDRESS				ADDRESS	ν)			
COLY ST-ZIP		DELETE	5.4 CITY-	ST-ZIP			Chan	ge Addition
TITLE		Fin percie	1		المنافذة الكال المتعال المتعال المتعال المتعال المتعال			Ac [""] veginor
NAME.			62 NAME		90000219 -05/29/970107	454	13	
STREET ADORESS			1	ADDRESS	-05/29/970107	(1UU	2	
CITY-ST-ZIP		ad with this filing does not qualify	64 CITY -		###165_00	·····		

4. I do hereby certify that the information supplied with this filing does not quality 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 if 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

AWON K. RUINA POLITICAL HAND STORES OF PRINTED PARE OF BIONNING OFFICER ON DIRECT

April 25, 1997 (561) 367-4027