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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

FILED

Apr 03 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000037522 (6)

CREATIVE FACTORY OF SOUTH FLORIDA, INC.

536 N.W. 87TH TERRACE CORAL SPRINGS FL 33071		596 N.W. 87TH TERRACE CORAL SPRINGS FL 33071-7181			,			
							3. Date Incorporated or Qualified	
2. Principal P	lace of Busine	ess	2a, Malfing	Address		······································	4. FEI Number / Applied For	
21 6000	# oto		26 Cuite A	-t # -t-			ATTECTON NOTAPPROCE	
Suite, Apt [22] City & State			27]	Suite, Apt. #, etc. 27 City & State			5. Certificate of Status Desired See Required \$8.75 Additional Fee Required	
[23]	ι;		28	iaie			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip		Country	Zip		Country	,	This corporation has liability for intangible tax under s. 199.032	
24	2	25	29	3	0		Florida Statutes Yes 🔀 No	'
	9. Name e	and Address of Curre	nt Registered Ag	ent		T	10. Name and Address of New Registered Agent	
1	NNA, NELSC				81	Namo		
	NW 87TH T			•	82	Street /	Address (P.O. Box Number is Not Acceptable)	
COM	RAL SPRING	5 PL 330/1			83			
					-			
	1				84	' '	FL 85 Zip Code	
11. Pursuant I	to the provise	ns of Sections 607.05	02 and 607.1508,	Florida Statutes	, the abov	e-named	d corporation submits this statement for the purpose of changing its register reporation's board of directors. I hereby accept the appointment as registered	ed
agent. La	m familiar viti	y and accluding this	tions of Section	607.0505, Flori	da Statute	7 mie Com S.	poration's poard of directors. Thereby accept the appointment as registered	,
SIGNATURE	ا) المر	MUNITED MAKE	ω				3.30.97	
12.	Signature #110010		ent and title if applicable	(NOTE: I	Registered Ap	ent algnature	o required when reinstairing) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
THILF	P	,		DELETE	1.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addit	ion
NAME	MEDINA, N	NELSON X	•		1.2 NAME		i i i i i i i i i i i i i i i i i i i	
STREET ADORESS	•	87TH TERRACE			1.3 STREET	ADDRESS		
CDY-S1-20°		PRINGS FL 33071			1.4 CITY - 9			
1(f) E	VP	Production of Section 1 .		DELETE	2.1 TITLE	.,	Change Addi	lion
NAME	BRAUD, K	erry			2.2 NAME			
STREET ADORESS	536 N.W. (87TH TERRACE			2.3 STREET	ADDRESS		
CHY-S1-ZIF	CORAL SP	PRINGS FL 33071			2. 4 CITY-:	ST-ZIP		
TOLE				DELETE	31 TITLE		Change Addi	ion
NAME					3.2 NAME			
STHELT ACORESS					33 STREET	ADDRESS		
City - \$7 - 710					3.4. CITY-	5T - ZIP		
TITLE			L	DELETE	4.1 TITLE		Change Addin	ion
NAME CODELL LONGOCCO					4. 2 NAME	1000500		
STREET ADDRESS CITY-SE-ZIP					4.3 STREET	i		
TITLE			Т	DELETE	4.4 CITY - S 5.1 TITLE	1-21	Change Addi	ina
NAME			•	· -	5.2 NAME		, sample [Note	
STREET ADDRESS					5.3 STREET	ADDRESS		
CiTy - S1 - ZiP					5.4 CHY-S			
THLE				DELETE	6.1 TITLE		Change Addit	ion
NAME					6.2 NAME			
STREET ADDRESS					6.3 STREET	ADDRESS		
CITY - ST - ZIP					6.4 CITY - S			
informatini	n indicated or	i this alloual report or.	supplemental anno	ual report is true	and acci	irete and	stated in Section 119.07(3)(i), Florida Statutes. I further certify that the d that my signature shall have the same legal effect as if made under oath; report as required by Chapter 607, Florida Statutes; and that my name	that