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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

	MENT # P95000 D SPIRIT CREATIONS, INC.	088835 (0)							
Principal Place of Business Mailing Address			ldress			I INDIANOI AND LOTAR DAVA BOAR DOVA	141 <b>80191 1819</b> 4 1		DI <b>d</b> iki 1 <b>48</b> 1
2810 MORNING GLORY LANE DAVIE FL 33328		2810 MORNING GLORY LANE DAVIE FL 33328-6914							
						3. Date Incorporated or Qualified 11/17/1995	05/0	e of Last F	Report
<b>⊢</b>	lace of Business	2a. Mailing Address				4. FEI Number 65. Olek 8	132		oplied For
21		26				APPLIED FOR			ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		<b>+</b>	Additional equired
City & Stat	θ	City & State		•		Election Campaign Financing     Trust Fund Contribution		\$5.00	May Be to Fees
Ζιρ	Country	Zip	Cou	intry	,	8. This corporation has liability for			. 199.032,
24	25	29	30				Yes D		
	9, Name and Address of Current	Registered Agent			ı- <del></del>	10. Name and Address of New R	egistered A	gent	
KATZ, SHERIE R				81	Name				
2810 MORNING GLORY LANE DAVIE FL 33328				82	Street Add	dress (P.O. Box Number is Not Accepta	ble)		
				83	<u> </u>				<del></del>
				53					
				84	Crty		FL	<b>85</b> Zip	Code
11. Pursuant office or ragent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State of im familiar with, and accept the obligation Signature, typed or printed name of registered agen.					rporation submits this statement for the ation's board of directors. I hereby acce	purpose of ept the appo	changing i intment as	ts registered registered
12.	OFFICERS AND		13.	u Age	an s grature req.	ADDITIONS/CHANGES TO OFFI		DIRECTOR	RS IN 12
TITLE	D	DECETE	1.1 71	TLE				Change	Addition
NAME	HARDIN, SHELLY		1.2 N	AME					
STREET ADDRESS	401 SEA TURTLE TERRACE		1.3 S	REF1	ADDRESS				
CITY-ST-ZIP	PLANTATION FL 33324		1.4 0	TY-S	T-ZIP				
TITLE	D	☐ DELETE	2.1 TI	TLE			i	Change	☐ Addition
NAME	DENTLER, MIRIAM		2.2 No	AME					
STREET ADDRESS	2528 MARCY AVENUE		2.3 S	REET	ADDRESS				
CITY-ST-ZIP	EVANSTON IL 60201	100.00			51 - 7IP			<del>-</del>	<u> </u>
TITLE	D	☐ DELETE	3 1 TI					Change	Addition
NAME	KATZ, SHERIE R		3.2 N						
STREET ADDRESS	2810 MORNING GLORY LANE				ADDRESS				
CITY-ST-ZIP	DAVIE FL 33328	DELETE			iT - ZIP			Change	Addition
TITLE		□ MIGG	4.1 11				ı	change	L AUGINIUM
STREET ADDRESS			4 2 N		ADDOLOG				
					ADDRESS				ļ
CITY-ST-ZIP TITLE		DELETÉ	5.1 TI		T-ZIP			Change	Addition
NAME		Land Ornelle	5.2 N				•		
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			1		T-ZiP				
TITLE		DELFTE	6.1 TI		1-417			Change	Addition
							•		

14. I do hereby certify that the information supplied with this filing does not qualify 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 eath; 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.

CICMATUDE.

STREET ADDRESS

M. S. RKOK

CHEOSE D L

4/20/02

954-452-297.7

**FILED** 

May 06 1997 8:00am

Secretary of State