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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUN 1. Corporation ANJUL	MENT # P9600 I'S CREATIONS, INC.	002	28005 (2	!)						
Principal Place	of Business	Mai	iling Address		_		-\			/
8088 W MCNAB RD BAY A-1 NORTH LAUDERDALE FL 33068			BOSS W MCNAB RD BAY A-1 NORTH LAUDERDALE FL 33068				DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualified 03/25/1996			
2. Principal Pla	ce of Business	26.	Mailing Address		_		4, FEI Number		$\top \top$	Applied For
21		26					65-0667314			Not Applicable
Suite, Apt. #	, etc.	F-5	Suite, Apt. #, etc.				5. Certificate of Status Desired	j		Additional
City & State		27	City & State							Required
23		28	thy o oldo				6. Election Campaign Financing Trust Fund Contribution	}		May Be
Zıp	Country		Zip	Coun	try		8. This corporation owes or has paid th	e curre		
24	25	29		30			Personal Property Tax due June 30.		Yes	□ No
<u> </u>	g, Name and Address of Current	Registe	ared Agent	—— 	B1	Name	10. Name and Address of New Registe	ered Ag	jent	
	ARAINE, SHRIDAT C					L				
8088 W MCNAB RD BAY A-1				6	B2	Street Addre	ess (P.O. Box Number is Not Acceptable)			
	ORTH LAUDERDALE FL 33068			ļe	вз					
				8	В4	City		FL	85 Zi	p Code
11. Pursuant to	the provisions of Sections 607 0502	and 60	7.1508, Florida Statul	tos, the abo	ove.	-named corpr			hanging	its registered
SIGNATURE	gistered agent, or both, in the State is familiar with, and accept the obligationalized by the police of the polic						oration submits this statement for the purpoion's board of directors. I hereby accept the	е аррон	ntmeni	as registered
12.	OFFICERS AND) DIRI CI		13.			ADDITIONS/CHANGES TO OFFICERS			
TITLE	D		☐ DELETE	1.1 1(1)				L	Chang	e 🔲 Addition
NAME	NARAINE, SHRIDAT C			1.2 NAM						
STREET ADDRESS	8088 W MCNAB RD NORTH LAUDERDALE FL 33	1000				ADDRESS				
CITY-ST-ZIP TITLE	D	W00	DELETE	1.4 DITY 2.1 TITL		1-219			Chanp	e Addition
NAME	NARAINE, PREADARSHNI V			2.2 NAM		ı		_		
STREET ADDRESS	8088 W MCNAB RD					ADDRESS				
CITY-ST-ZIP	NORTH LAUDERDALE FL 33	1068		2. 4 CIT	Y-5	ST-21P				
TITLE			DELETE	3.1 TITL	E				Chang	e Addition
NAME				3.2 NAM	Æ	1				
STREET ADDRESS				3.3 STR	EE1 /	ADDRESS				
CITY-SI-ZIP			Printe	3.4. CIT		1 - ZIP			100	1 2 10
TITLE			DELETE	4.1 T(T)				L	Chang	e L_ Addition
NAME PTDEET ADDRESS				4. 2 NAI		ADDRESS				
STREET ADDRESS CITY-ST-ZIP						···				
TITLE			DELETE	4.4 C(TY 5.1 T(TL		1-211			Chang	e Addition
NAME				5.2 NAM		-		_		•
STREET ADDRESS						ADDRESS				
CITY-ST-ZIP				5.4 CITY						
TITLE			DELETE	6.1 TITL					Chang	e 🔲 Addition
NAME				6.2 NAM	Æ	ļ				
STREET ADDRESS				6.3 STR	EFT.	ADDRESS				

14. Thereby 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 enjural 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 comporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or or an attachment with an address

SIGNATURE:

FILED

Mar 19 1998 8:00am

Secretary of State