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

**PROFIT CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P960 000 476 64 1. Corporation Name Innovative Crafts & Graphics

**FILED** Jun 02 1998 8:00am Secretary of State

			1	
Principal Place of Business	Mailing Address			
	N 169 La	ne		
Miami, Fl. 33187			DO NOT WRITE IN THIS SPACE	
			3. Date Incorporated or Qualified  06 - 5 - 96	
Principal Place of Business 2a, Marling Address		4. FEI Alumber Applied For		
1 (950VE) 26 20 ME Suite, Apt. #, etc. Suite, Apt. #, etc.			Applicable	
22 27			5. Certificate of Status Desired	
City & State	City & State		6. Election Campaign Financing \$5.00 M	lay Be
23	28		Trust Fund Contribution	Fees
Zip Country	Žip	Country	8. This corporation owes or has paid the current year Intan	
24 25 A Name and Address of	[29] I Current Registered Agent	30	Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent	NO
		81 Name		
(planue) HMPAR	IVE Crafts 6			
Innova 7	We Confise 6	82 Street Add	dress (P.O. Box Number is Not Acceptable)	
15213		83	<i>n</i> <u>C</u>	
13 263	SW 169 Lan			
. /	Mia, F1. 33187	84 City	FL 85 Zip Co	ode
11. Pursuant to the provisions & Sections	907.0502 and 607.1508, Florida Statu	tes, the above-named cor	• • • • •	registered
office or registered agent or both in	he State of Florida, Such change was	authorized by the corpora	poration submits this statement for the purpose of changing its ratted's board of directors. I hereby accept the appointment as re	gistered
	The page	2 17 5 TOK	05-6-98	
SIGNATURE Signature typed or printed region of reg	pateresi agent and the diapplicable (NO)	L. Registered Agent signature requ	into when reinstating) DATE	
12. OF IC	FRS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	IN 12
TITLE PRESIDENT	DELETE	1.1 TIILE	☐ Change	Addition
NAME AMPACO	Pasta	1.2 NAME		
STREET ADDRESS	110 \$	1.3 STREET ADDRESS		
	169 Bane	1.4 C(1Y - ST - Z(P		
THILE MIAMI, FI	33/87 HERE	2.1 THLE	L_J Change 1	Addition
NAME		2.2 NAME		
STREET ADDRESS		2 3 STREET ADDRESS		
CITY-ST-ZIP	DELETE	2. 4 CITY - S1 - 7IP	Change	Addition
TITLE VICE Pres:	<del></del>	3 1 TITLE 3.2 NAME	Change (	L.J ROURIUM
STREET ADDRESS Tracy S. 1	Alaer	3.3 STREET ADDRESS		
100 / 0 0	1701000			
TITLE .	DELETE   مصرف مستعد ا	3.4. CITY-\$1-7IP 4.1 TITLE	Change	Addition
NAME MIGMI, 7	-1, 33187 DELETE	4. 2 NAME	•	
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE	DELETE	5.1 TITLE	☐ Change	Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY - ST - ZIP		
TITLE	DELETE	61 TITLE	Change	Addition
NAME		6.2 NAME	8000025503 <b>9</b> 5°°°°°°°°°°°°°°°°°°°°°°°°°°°°°°°°°°°°	ハ
STREET ADDRESS		6.3 STREET ADDRESS	***150.00	Ulr
CITY-ST-ZIP		6.4 City-St-ZIP		
14. I hereby certify that the information sur	optied with this filing does not qualify f	or the exemption stated in	Section 119.07(3)(i), Florida Statutes. I further certify that the in	iformation
officer or director of the corporation or	the receiver or trustee empowered to	execule this report as rec	ure shall have the same legal effect as it made under oath; that I quired by Chapter 607, Florida Statutes; and that my name appe	ars in
Block 12 or Block 13 if changed, or or	ran adachment wan an adamyss.	/	11 -00 (1 (200)	