

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

FILED
May 06, 1999 8:00 am
Secretary of State

05-06-1999 90095 002 ***150.00

PROFIT CORPORATION
ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000063195

1. Corporation Name
INNOVATIVE TRENDS, INC.



Principal Place of Business
2128 NE 123RD ST
N MIAMI FL 33181
US

Mailing Address
2145 NE 123RD ST
N MIAMI FL 33181
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 2128 NE 123RD ST 27 Suite, Apt. #, etc. 28 City & State 29 Zip Country 30		3. Date Incorporated or Qualified 07/26/1996		4. FEI Number 65-0694252		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees		8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent ALL CATHERINE R 2145 NE 123RD ST N MIAMI FL 33181				10. Name and Address of New Registered Agent 81 Name Rance, Michael 82 Street Address (P.O. Box Number is Not Acceptable) 2108 NE 123RD ST 83 84 City N. Miami FL 85 Zip Code 33181			
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Michael Rance Michael Rance DATE 4-28-99
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P	NAME	RANCE, MICHAEL	1.1 TITLE	Change Addition		
STREET ADDRESS	2145 NE 124TH ST	1.2 NAME		1.2 NAME			
CITY-ST-ZIP	N MIAMI FL 33181	1.3 STREET ADDRESS	2108 NE 123RD ST	1.3 STREET ADDRESS			
		1.4 CITY-ST-ZIP	N. Miami FL 33181	1.4 CITY-ST-ZIP			
TITLE	ST	NAME	ALL CATHERINE R	2.1 TITLE	Change Addition		
STREET ADDRESS	2145 NE 124TH ST	2.2 NAME		2.2 NAME			
CITY-ST-ZIP	N MIAMI FL 33181	2.3 STREET ADDRESS		2.3 STREET ADDRESS			
		2.4 CITY-ST-ZIP		2.4 CITY-ST-ZIP			
TITLE		NAME		3.1 TITLE	Change Addition		
STREET ADDRESS		3.2 NAME		3.2 NAME			
CITY-ST-ZIP		3.3 STREET ADDRESS		3.3 STREET ADDRESS			
		3.4 CITY-ST-ZIP		3.4 CITY-ST-ZIP			
TITLE		NAME		4.1 TITLE	Change Addition		
STREET ADDRESS		4.2 NAME		4.2 NAME			
CITY-ST-ZIP		4.3 STREET ADDRESS		4.3 STREET ADDRESS			
		4.4 CITY-ST-ZIP		4.4 CITY-ST-ZIP			
TITLE		NAME		5.1 TITLE	Change Addition		
STREET ADDRESS		5.2 NAME		5.2 NAME			
CITY-ST-ZIP		5.3 STREET ADDRESS		5.3 STREET ADDRESS			
		5.4 CITY-ST-ZIP		5.4 CITY-ST-ZIP			
TITLE		NAME		6.1 TITLE	Change Addition		
STREET ADDRESS		6.2 NAME		6.2 NAME			
CITY-ST-ZIP		6.3 STREET ADDRESS		6.3 STREET ADDRESS			
		6.4 CITY-ST-ZIP		6.4 CITY-ST-ZIP			

14. I 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 oath; 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, with all other like empowered.

SIGNATURE: Michael Rance DATE 4-28-99 305-891-7373
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)

0275610