## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## Feb 04, 2004 08:00 AM Secretary of State DOCUMENT # P96000067371 LEATHER CREATIONS, INC. Principal Place of Business Mailing Address 9083 PINE SPRINGS DRIVE 7400 N FEDERAL HWY BOCA RATON, FL 33487 BOCA RATON, FL 33428 01292004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0693851 Not Applicable \$8.75 Additional 5. Certificate of Status Desired $\Box$ Fee Required 6. Name and Address of Current Registered Agent FERRANDI, ROBERT V DO NOT WRITE 9083 PINE SPRINGS DRIVE BOCA RATON, FL 33428 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May 8e FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 U00000034552 '05/04-80087-019 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE FERRANDI, ROBERT NAME STREET ADDRESS 9083 PINE SPRINGS DR BOCA RATON, FL CITY-ST-ZIP TETLE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY - \$1-28P IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP THILE

12. I hereby certify that the information supplied with this fifing does not qualify for the exemption stated in Section 119.07(3)(1). Florida Statutes. I further certify that the information indicated on this report or supplemental 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all otifier like enpowered. changed, or on an attachment with

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

**FILED**