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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # **P96000083697**1. Corporation Name

CREATIVE DOLL COMPANY, INC.

## **FILED** Feb 18, 1999 8:00am **Secretary of State**

02-18-1999 90067 029 \*\*\*150.00



Principal Place	e of Business	Mailing Address							
4301 NORTH FE	EDERAL HIGHWAY #200	4301 NORTH FEDERAL HIGHM	VAY #200						
FORT LAUDERDALE FL 33308-5209 FORT LAUDERDALE FL 3330									
					DO NOT WRIT	E IN THIS S	PACE		٦
					3. Date Incorporated or Qualifed 10/07/1996				
Principal Place of Business     2a. Mailing Addr		2a. Mailing Address	dress		4. FEI Number			pplied For	_ ;
21		26						lot Applicable	╝,
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional	
22		27				· · ·		Required	_
City & State	e	City & State			6, Election Campaign Financing		•	May Be	
23		28	Country		Trust Fund Contribution			to Fees	-
Zip	Country	Zip	¬ ´		8. This corporation owes the curre	-	ngible □Yes	□No	
24	25 9. Name and Address of Current	Pagistared Agent	וי		Personal Property Tax.  10. Name and Address of New R				$\exists$
	9. Name and Address of Current	registeres Agent	81	Name	10. 1141110 0114 7.001000 011101111	-	3		1
LAMI	pe, donald e								4
	NORTH FEDERAL HIGHWAY #20	00	82	Street Addr	ess (P.O. Box Number is Not Accepta	ble)			
	T LAUDERDALE FL 33308-5209		83		The state of the s	18 113 - 3	12 13 13 1	4 17. ( 133. 194)	1
						1964	经银金	\$ \$ . W . W	
			84	City		FL	85 Zip	Code	
11 Pursuant	to the provisions of Sections 607.0502	and 607.1508. Florida Statutes.	the above	e-named corp	oration submits this statement for the	ourpose of cl	nanging it	s registered	1
office of re	egistered agent, or both, in the State of m familiar with, and accept the obligation	f Florida. Such change was auth	orized by	the corporation	on's board of directors. I hereby accep	t the appoint	ment as r	egistered	
-	in familiar with, and accept the obligation	ons or, section 607.0303, Florida	a Statutes	•					
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	gistered Ager	nt signature require	d when reinstating)	DATE	<del></del>	•	
40	OFFICERS AND	DIDECTOR	43		ADDITIONOLOUIANOED TO DE	ICEDE AND	DIRECT	ORS IN 12	7
12.		DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AND	2		⊶ '
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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.