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

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000089205 (4)

INNOVATIVE CREATIONS INTERNATIONAL INC.

Principal Place of Business Mailing Address 1821 SOUTHWEST 55TH AVENUE 1821 SOUTHWEST 55TH AVENUE

## **FILED** May 01 1997 8:00am Secretary of State



PLANTATION FL 33317		PLANTATION FL 33317-5929			
				3. Date Incorporated or Qualified 10/29/1996	3a. Date of Last Report
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	M Applied For
21		26			Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State			Fee Required
23		28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Country	This corporation has liability for it.	
24	25	29	30		Yes No
	9. Name and Address of Curre		Lanindan	10. Name and Address of New Re	gistered Agent
CORPORATION SERVICE COMPANY  81 Name Ronald T- Kamen					
	1 HAYS STREET		82 Street A	deress (P.O. Box Number is Not Acceptab	
TALI	LAHASSEE FL 32301-2525	Bal Southwest	- 55" HUE-		
ĺ			83		
			84 City	1 1 15	FL 85 Zip Code 3333/7
11 Pure upon to the provisions of Sections 607 0503 and 607 1508 Florida Statutes the above pages of sections for the pure section of the pure pages of sections for the pure section of the pure pages of the pur					
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 eigent, 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 eigent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE	Signature, typed or printed name of registered as		Registered Agent signature re		DATE
12.	OFFICERS AN	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.5 TOTLE		Change Addition
	NAME KAMEN, RONALD T STREET ADDRESS 1821 SOUTHWEST 55TH AVENUE		1.2 NAME		
DI ANTITALI CI ANALE			1.3 STREET ADDRESS		
CETY-ST-ZIP TITLE	PLANTATION PL 33317	DELETE	1.4 C(1Y - \$1 - Z(P		Change Addition
NAME		L Dittie	2.1 TO LE 2.2 NAME		ChangeAddition
STREET ADORESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY- ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CHY-S1-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME	`	
STREET ADDRESS			4.3 STREET ADDRESS	0111	$\wedge$
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE	# b, 0	Change Addition
NAME			5.2 NAME	$\mathcal{L}_{\mathcal{X}}$	- FT Outside (TT Vincitioa)
STREET ADDRESS			5.3 STREET ADDRESS	(,)	
CITY-ST-ZIP			5.4 City - ST - ZIP	V)	
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME	<b>40000216</b> -05/05/970103	5554
STREET ADDRESS	,		6.3 STREET ADDRESS		89005
CITY-ST-ZIP			6.4 CITY-ST-ZIP	***165 <b>.</b> 00	

14. I do 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 3 if changed, or on an attachment with an address.