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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 28 1997 8:00am

Secretary of State

A ANDRINAL CON CALLS BUTCH BOTTE ANDER DAME HOLDE COLUMN AND AN OLD COLUMN COLUMN COLUMN

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000097318 (5)

DEBBIE'S CREATIONS, INC.

Principal Place of Business Mailing Address										4 (1966) 1967 1967 1968 1967 1967 1967 1967 1967 1	Julia Il fil			
6701 RIVERBIDE	E DRIVE	57	5701 RIVERSIDE DRIVE											
APT 908				APT 306										
CORAL SPRING	is F: 33067		CC	ORAL SPR	INGS F: 3306	67-2935	5			9 Data Innercorated as Cualified	20 0	ete el l'e	of De	
										3. Date Incorporated or Qualified 11/25/1996	3a. D	ate of La	isi nej	port
2. Principal Place of Business				2a, Mailing Address						4. FEI Number	_	L	Арр	lied For
21				26						65-069856	<u>a</u>			Applicable
Sulte, Apt.	#, etc.		Suite, Apt. #, etc.						5. Certificate of Status Desired				dditional	
22				27 City & State									e Req	
City & State				28						Election Campaign Financing Trust Fund Contribution			.00 N ded to	May Be Fees
Zip	Zip Country			Zip Cou			Country	ntry		8. This corporation has liability for i	ntangible	e tax und	ler s.	199.032,
24	25				30					Florida Statutes 🔀 Yes 🗌 No				
9. Name and Address of Current Registered Agent								т-	10. Name and Address of New Registered Agent					
	Leher, Jos						81		Name					
5701 RIVERSIDE DRIVE							82	-	Street Addre	ss (P.O. Box Number is Not Acceptab	le)			
APT COR.		S FL 33067					83	H						
}							100	<u> </u>	Cata			7551	2 - C	
							84		City		FL	85	Zip Co	006
office or r	registered ag	ions of Sections 607.0 jent, or both, in the St th, and accept the ob	ate of Flor	rida. Such	i change was	s auth	orized by	y t	named corpo the corporatio	ration submits this statement for the p in's board of directors. I hereby accep	urpose of the app	f changi pointmen	ng its it as re	registered egistered
SIGNATURE														
	Signature, typed	or printed name of registered			le (N	OTE: Bo		eni.	signature required		DATE	D BIDEC	TODE	10140
12.	PRESK	OFFICERS.	ANLI LIIRE	CIORS	DELETE		13.	_		ADDITIONS/CHANGES TO OFFIC	ERS AN	Char		Addition
			0		been	- 1	12 NAME					[] Oliai	igo	Addition
NAME JOSEPH KELLEHER STREET ADDRESS 5701 RIVERSIDE DR				£ 306			1.3 STREET		nnnnee					
CITY-ST-ZIP	COPA	SPRINGS	F	دکي	5067	- 1	1.4 CITY - S							
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NAME					_	1	2.2 NAME						<i>u</i> -	
STREET ADDRESS							2.3 STREET	AI	DOBESS					
CITY-ST-ZIP	ļ					2. 4 CITY-		1						
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NAME							3.2 NAME							
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NAME							6.2 NAME							
STREET ADDRESS					6.3 \$1			I A[DDRESS					
CITY_CT_7ID	1						CAPITY	21	. סול					

14. Ido 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 exporation or they expressed expressed in Block 12 or Block 12 or Block 12 or Block 12 or Block 13 if changed and that my name appears in Block 12 or Block 13 if changed and the supplemental expressed in Block 12 or Block 13 if changed and the supplemental expressed in Block 12 or Block 12 or Block 13 if changed and the supplemental expressed in Block 12 or Block 1