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

Mailing Address

8518 SW 8 STREET

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

8518 SW 8 STREET



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Feb 28 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000100114 (3)

CREATIVE NEW CONCEPTS, INC.

SUITE 1323 MIAMI FL 33144		SUITE 1323 MIAMI FL 33144-4053							
					3. Date Incorporated or Qualified 12/09/1996	ed 3a. Date of Last Report			
2. Principal Pl	lace of Business	2a. Mailing Address				4. EEI Number	· · · · · · · · · · · · · · · · · · ·	Apr	plied For
21		26				65-0716159		,	i Applicable
Suite, Apt.	#, ek:	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State	6:	City & State			6. Election Campaign Financing		\$5.00	May Be	
23		28				Trust Fund Contribution		Added to	
Zip	Country	Zip	Cour	Country		8. This corporation has liability for in			199.032,
24	[25]	29	30			Florida Statutes  10. Name and Address of New Reg	Yes 🔲 I		
41 CC	9, Name and Address of Curren	i negistered Agent		81 N	lame	10, Name and Address of New Ref	liatered Wor	<del>MIL</del>	
	ONSO, MANUEL								
8518 SW 8 STREET SUITE 1323				<b>82</b> S	treet Addre	ss (P.O. Box Number is Not Acceptable	e)		
	L 1323 Al FL 33144			83					
MININ	NI FL 33 144								
				<b>84</b> C	ity		FL '	35   Zip C	Code
11. Pursuant to office or no agent 1 as	to the provisions of Sections 607.0502 egistered agent, or both, in the State in familiar with, and accept the obliga	2 and 607.1508, Florida Statu of Florida. Such change was thoris of, Section 607.0505, Fl	tes, the ab authorized orida State	ove-na by the utes.	amed corpo e corporatio	oration submits this statement for the pron's board of directors. I hereby accep	urnose of ch	anging its	registered registered
SIGNATURE	Stgramere, type-inc. printed reane of registered ager	c south to it applicable. (NOT	If: Registered	Anont E	anature require	d when reinstating)	DATE		
12.	OFFICERS AND		13.	- Agon in Br	g-takere - odar o	ADDITIONS/CHANGES TO OFFIC		RECTOR	S IN 12
TITLE	PD	☐ DELETE	1.1 TIT	LE				Change	Addition
NAME	ALFONSO, MANUEL			1.2 NAME					ļ
STREET ADDRESS	8330 S.W. 11 TERRACE			1.3 STREET ADDRESS					
CITY - \$1 - ZIP	MIAMI FL 33144			1.4 CITY-ST-ZIP					
TITLE	DELETE			2.1 TITLE				Change	Addition
NAME:			2.2 NA	ME					
STREET ADDRESS			2.3 STI	REET ADD	RESS				
CITY - ST - ZiP		T 251 551		1Y - S1 - Z	îP .				
TITLE	☐ DELETE			3.1 TITLE			· L	Change	Addition
NAME			3.2 NA						
STREET ADDRESS				REET ADE					
CITY-ST-7/P		DELETE	3.4. Cl	1Y-\$1-Z	IP	<del></del>		Change	Addition
TITLE NAME				4. 2 NAME			L-	Onlange	ROOMION
STREET ADDRESS				REET ADO	VDE CC				
City - ST - 7IP				Y - ST - Zi					
Title	DELETE			51 TITLE				Change	Addition
INLAM		<del></del>	5.2 NA					_	
STREET ADDRESS			5.3 STI	REET ADD	CRESS				
CHTY-ST-7IP			5.4 CIT	ry-ST-Zi	IP				
Tru(		DELETE	6.1 TIT	LF			Ľ	Change	Addition
NAME			62 NA	ME				_	
STREET ACORESS		٨	6.3 ST	REET ADD	ORESS			•	
CITY: \$1:ZIP				Y-ST-Z					
informatio Lam an o	on indicated on this annual raport or s	dipplemental annual report is the techniver of trustee empor	true and a wered to e	ccurát	e and that	in Section 119.07(3)(i), Florida Statutes my signature shall have the same lega as required by Chapter 607, Florida S	effect as if	made und	der oath: that I
SIGNAT	URE: SIGNATURE AND TYPEO OR	PRINTED NAME OF SIGNING OFFICE	OR DIRECT	OA		2/25/17	Daytir	ne Phone # 1	0003636