FIT RATION REPORT

POCLIMENT # DOZOO



OW: FILING FEE AFTER MAY 1ST IS \$550.00

DIVISION OF CORPORATIONS

FILED Apr 09, 1999 8:00 am Secretary of State 04-09-1999 90006 009 ***150.00 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

1. Corporation	AL CREATIONS, INC.	U34U6 <i>1</i>					
Principal Place of Business Mailing Address					f 100;100; 110 (0.11) (0.01) 00(1) 00(1) 00111	** ()	(E)(()\$\$) (ES)
417 E SHEIDAN STREET 417 E SHERIDAN STREET							
SUITE #280 SUITE #280							
DANIA FL 33004 DANIA FL 33004					DO NOT WRITE IN TH	IS SPACE	
US US				3. Date Incorporated or Qualifed			
	•				04/14/1997	-	
2 Principal P	lace of Business	2a. Mailing Address		_	4, FEI Number	Ap:	plied For
└	,	26			65-0759583		t Applicable
21 Suite Apt	Suite, Apt. #, etc. Suite, Apt. #, etc.			 -		\$8.75 A	Additional
		⊢			5. Certifcate of Status Desired	Fee Re	
22 City & Ctat		City & State			a Figure Compains Financins		
City & Stat	e - a marine and	,	⇒ === :	`	6. Election Campaign Financing	- ك ئن Added to	May Be
23		28	Country				01003
Zip 24	Country Zip 25 29 3		·n ´		8. This corporation owes the current year intangible Personal Property Tax.		
'	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registere	d Agent	
				Name			
DASILVA, JOSE C LUADIO CLAUDIO			100	Charat Address (D.O. Bay Number in Net Acceptable)			
417	E SHERIDAN STREET	•	02	82 Street Address (P.O. Box Number is Not Acceptable)			
SUITE #280			83			•	
DANIA FL 33004				}			
J	.,, , , , , , , , , , , , , , , , , , ,		84	City	F	85 Zip C	Code
			ل	L.,	poration submits this statement for the purpose		registered
agent. I a SIGNATURE	m familiar with, and accept the obligation of familiar with, and accept the obligation of familiar with a second sec	and title if applicable. (NOTE: Re			of when reinstating) DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	P -	☐ DELETE	1.1 TITLE			Change	☐ Addition
NAME	DASILVA, JOSE C	:	1.2 NAME				
STREET ADDRESS	417 E SHERIDAN ST STE 280		1.3 STREE	TADDRESS			į
CITY-ST-ZIP	DANIA FL 33004		1,4 CITY+S	ST-ZIP			
TITLE		☐ DELETE	2.1 TITLE			☐ Change	☐ Addition
NAME	·		2.2 NAME				
1			ľ	T ADDRESS			1
STREET ADDRESS							
CITY-ST-ZIP		DELETE	2. 4 CITY-1	S1-2JP		Change	Addition
TITLE							_
NAME.	ا محمد د استویان		3.2 NAME		and the second s	_ 	
STREET ADDRESS	İ		3.3 STREE	TADDRESS			
CITY-ST-ZIP			3.4. CITY-	ST-ZIP			Addition
ΠΓLE		☐ DELETE	4.1 TITLE	(Change	☐ Addition (
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREE	TADDRESS		•	
CITY-ST-ZIP			4.4 CITY-5	ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE			Change	☐ Addition
NAME			5.2 NAME	ļ			ŀ
STREET ADDRESS			5.3 STREE	TADDRESS			Į
	1		5.4 CITY-5	í			1
CITY-ST-ZIP		DELETE	6.1 TITLE			☐ Change	Addition
TITLE		F1 DECE15	6.2 NAME				
NAME	,			!			
STREET ADDRESS	'		6.3 STREE	TADDRESS			

6.4 CITY-ST-ZIP 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.