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 # **P97000046494**1. Corporation Name

Country

25

Suite, Apt. #, etc.

City & State

Zip

24

INNOVATIVE CEILINGS, INC.

Principal Place of Business	Mailing Address
3038-J N FEDERAL HWY FT LAUDERDALE FL 33006	3038-J N FEDERAL HWY FT LAUDERDALE FL 33006
Principal Place of Business	2a. Mailing Address

27

28

29

Suite, Apt. #, etc.

City & State

Zip

FILED Mar 05, 1999 8:00 am **Secretary of State**

03-05-1999 90129 010 ***150.00

	DO NOT WRI	TE IN T	HIS SPACE	
3.	Date Incorporated or Qualifed			
	05/27/1997			
4.	FEI Number			Applied For
	65-0766463			Not Applicable
5.	Certificate of Status Desired			5 Additional Required
6.	Election Campaign Financing Trust Fund Contribution			00 May Be ed to Fees
8.	This corporation owes the curre Personal Property Tax.	ent yea	r Intangible ☐ Yes	□¥Mo

10. Name and Address of New Registered Agent

Name and Address of Current Registered Agent		10. Name and Address of New Regist	ered A	gent		
ISAACSSTAN	81	Name				
3038-J N FEDERAL HWY	82	Street Address (P.O. Box Number is Not Acceptable)				
FT LAUDERDALE FL 33006	83					
	84	City	FL	85	Zip Code	

Country

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 agent, 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

2					
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re	gistered Agent signature re	equired when reinstating)	DATE	
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO C	FFICERS AND DIRECTOR	RS IN 12
TITLE	D DELETE	1.1 TITLE	· ·	☐ Change	Addition
NAME	ISAACS, STAN	1.2 NAME			
STREET ADDRESS	3038-J N FEDERAL HWY	1.3 STREET ADDRESS	·	•	
CITY-ST-ZIP	FT LAUDERDALE FL 33006	1.4 CITY-ST-ZIP			
TITLE	☐ DELETE	2.1 TITLE		☐ Change	☐ Addition
NAME		2.2 NAME			·
STREET ADDRESS		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. CITY-ST-ZIP			
TME	☐ DELETE	4.1 TITLE		☐ Change	Addition
NAME		4, 2 NAME			
STREET ADDRESS		4.3 STREET ADDRESS			
CiTY-ST-ZiP		4.4 CITY-ST-ZIP	<u> </u>		
TITLE	☐ DELETE	5.1 TITLE		Change	Addition
NAME		5.2 NAME	• • •	•	
STREET ADDRESS		5.3 STREET ADDRESS	'		
CITY-ST-ZIP		5.4 CITY-ST-ZIP			
TITLE	DELETE	6.1 TITLE		☐ Change	☐ Addition
NAME		6.2 NAME			
STREET ADDRESS		6.3 STREET ADDRESS	1		
		CACED/ OT 71D			

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.

954 382-5699