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PROFIT CORPORATION ANNUAL REPORT.

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000098678

1. Corporation Name

CREATIONS BY CONNIE, INC.

Apr 19, 1999 8:00 am Secretary of State

04-19-1999 90020 038 ***150.00



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Principal Place	e of Business	Mailing Address				I (BRICED) SIN INCIDENT PROBLEM	#111 ## 111 ## 11 #	(818) 1 6 11 0 6 1111 (00B) (817 199)
223 AMESBURY	223 AMESBURY CIRCL	3 AMESBURY CIRCLE							
SUN CITY CEN	TER FL 33573	SUN CITY CENTER FL	SUN CITY CENTER FL 33573			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed		SPACE	
1						11/20/1998			
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number		Apr	olied For
21		26 P.O. Box	.36	686	4	59-354876	6		Applicable
	#, etc.	Suite, Apt. #,.etc		<u></u>			***	\$8.75 A	dditional
22	3.5	27				5. Certifcate of Status Desired		Fee Re	quired
City & State	8	City & State	$\overline{}$			6. Election Campaign Financing		\$5.00	May Be
23		28 Bonita	Dorin	195_	FL	Trust Fund Contribution		Added to	Fees
Zip	Country	Zip	, _ c	buntry	, . /1	8. This corporation owes the cur	rent year int		_
24	25	29 34/36	30	<u>UŞF</u>	17	Personal Property Tax.			□No
	9. Name and Address of Current	Registered Agent		1		10. Name and Address of New	Registered	Agent	
DIAT	TILLO CONSTANCE M			81	Name				
	TILIO, CONSTANCE M			82	Street Ad	Idress (P.O. Box Number is Not Accept	able)		
	AMESBURY CIRCLE								
SUN	CITY CENTER FL 33573			83		·			
				84	City			85 Zip C	ode
				1 1			<u> </u>	<u>. _ </u>	
office or r	to the provisions of Sections 607.0502	af Florida. Such change wa	is authoriz	zed by t	-named co	prporation submits this statement for the ation's board of directors. I hereby acce	pt the appoi	cnanging its ntment as reg	registered jistered
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of familiar with, and accept the obligations.	af Florida. Such change wa	is authoriz	zed by t	-named co he corpora	progration submits this statement for the ation's board of directors. I hereby acceptance	pt the appoi	changing its ntment as rec	registered
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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.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP