


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 22, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P99000080157</b> 1. Entity Name <b>SABLE ART CREATIONS, INC.</b>	
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Principal Place of Business <b>12900 AUTOMOBILE BLVD BUILDING 1 SUITE K CLEARWATER, FL 33762-4715</b>	Mailing Address <b>12900 AUTOMOBILE BLVD SUITE G CLEARWATER, FL 33762-4715</b>
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03202005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-3597618</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  <b>IBRAHIM, BASSMI 1012 LAKE RIDGE DRIVE SAFETY HARBOR, FL 34695</b>
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**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY ST ZIP	P IBRAHIM, BASSMI M 1012 LAKE RIDGE DRIVE SAFETY HARBOR, FL 34695
TITLE NAME STREET ADDRESS CITY ST ZIP	VST IBRAHIM, SOHEIR 1012 LAKE RIDGE DRIVE SAFETY HARBOR, FL 34695
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04/22/05-80008-005 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Sohi Ibrahim v.P. 4/20/05  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #