

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 17, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # S11011**

1. Entity Name  
**A.D.M. CREATIONS, INC.**



Principal Place of Business

1109 N. 21ST AVE  
#113  
HOLLYWOOD, FL 33020

Mailing Address

20379 W COUNTRY CLUB DR  
#2238  
N MIAMI BEACH, FL 33180



01062006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number **65-0224916** Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional**  
Fee Required

6. Name and Address of Current Registered Agent

LEBOWITZ, EDWARD  
20379 W COUNTRY CLUB DR  
#2238  
N MIAMI BEACH, FL 33180

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

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME LEBOWITZ, MARCIA  
STREET ADDRESS 20379 W CTRY CLB DR 2238  
CITY-ST-ZIP N MIAMI BEACH, FL

TITLE VD  
NAME SINGER, SHARON  
STREET ADDRESS 20379 W CTRY CLB DR 2238  
CITY-ST-ZIP N MIAMI BEACH, FL

TITLE STD  
NAME LEBOWITZ, EDWARD  
STREET ADDRESS 20379 W CTRY CLB DR 2238  
CITY-ST-ZIP N MIAMI BEACH, FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

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01/20/06-80023-018 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Edward Lebowitz - EDWARD LEBOWITZ - 01/10/06 - 954-922-5205  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #