

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 06 1997 8:00am
Secretary of State

DOCUMENT # S76605 (2)
1. Corporation Name
B.J. CREATIONS INC.



Principal Place of Business
5520 58TH STREET NORTH
KENNETH CITY FL 33709

Mailing Address
5520 58TH STREET NORTH
KENNETH CITY FL 33709-2038

2. Principal Place of Business
21 5544 58th St. Nth.
Suite, Apt. #, etc.
22
City & State
23 KENNETH CITY, FLORIDA
Zip Country
24 33709 25 U.S.A.

2a. Mailing Address
26 5544 58th St Nth.
Suite, Apt. #, etc.
27
City & State
28 KENNETH CITY, FLORIDA
Zip Country
29 33709 30 U.S.A.

3. Date Incorporated or Qualified
08/29/1991

3a. Date of Last Report
05/01/1996

4. FEI Number
65-0275512

Applied For
Not Applicable

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

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent
WALKER, BARBARA
5400 54TH AVE., NORTH #C
ST. PETERSBURG FL 33709

81 Name
WALKER, BARBARA.
82 Street Address (P.O. Box Number is Not Acceptable)
6126 58th St. North.
83
84 City
St. PETERSBURG, FL 85 Zip Code
33709

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.

SIGNATURE BARBARA J. WALKER

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/28/97
DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
	PT WALKER, BARBARA	5400 54TH AVE, NORTH, #C	ST. PETERSBURG FL	<input type="checkbox"/>
	VS LOCK, JOSEPH A.H.	10029, GULF BLVD, #2	TREASURE ISL FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>

14. I do 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.

SIGNATURE B. J. Walker

4-28-97 5412-6135 (913)

CR2E034 (9/96)