

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

FILED
Apr 22 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # S78256 (2)
1. Corporation Name
CARMA'S DANCE CREATIONS, INC.



Principal Place of Business
78 GABLES BLVD
#3
FT LAUDERDALE FL 33326
US

Mailing Address
78 GABLES BLVD
#3
FT LAUDERDALE FL 33326
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 78 GABLES BLVD Suite, Apt. #, etc. 22 City & State 23 Ft Lauderdale FL 24 Zip 33326 25 Country US		2a. Mailing Address 26 78 GABLES BLVD Suite, Apt. #, etc. 27 City & State 28 Ft Lauderdale FL 29 Zip 33326 30 Country US		3. Date Incorporated or Qualified 09/06/1991	
4. FEI Number 65-0285021		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					

9. Name and Address of Current Registered Agent TORRES, RONALD R 1880 N. UNIVERSITY DR. PLANTATION FL 33322		10. Name and Address of New Registered Agent 81 Name DENNIS PAWLEWICZ 82 Street Address (P.O. Box Number is Not Acceptable) 78 GABLES BLVD 83 84 City Fort Lauderdale FL 85 Zip Code 33326	
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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  (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST GALLO, CARMA LEE 78 GABLES BLVD FT. LAUDERDALE FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	PAWLEWICZ, CARMA LEE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	NONE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	DENNIS PAWLEWICZ 78 GABLES BLVD Ft Lauderdale FL 33326
TITLE NAME STREET ADDRESS CITY-ST-ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	

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.

SIGNATURE: Carma Lee (Gallo) Pawlewicz 4/18/98 954 389-3540

CR2E034 (10/97)