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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 29 1997 8:00am

Secretary of State

305.5516<u>691</u>

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V39127

appears in Block 12 or Block 13 if o

SIGNATURE:

(8)

CLAYWOOD CREATIONS, INC.							
Principal Place of Business 10450 SW 27TH ST MIAMI FL 33165		Mailing Address 10450 SW 27TH ST MIAMI FL 33165-2765					
				3. Date Incorporated or Qualified 05/27/1992	3a. Date of La		7
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	1	Applied For	1
21		26		65-0335034		Not Applicable	в
Suite, Apt	# etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	1	5 Additional e Required	
City & State 23	?	City & State		Election Campaign Financing     Trust Fund Contribution		00 May Be led to Fees	
Zip	Country	Zip	Country	8. This corporation has liability for in			
24	25	29	30	Florida Statutes	Yes No		
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Re	Istered Agent		7
	URADO, ANA C.		81 Name				
	50 SW 27TH ST		82 Street Add	ress (P.O. Box Number is Not Acceptable	ө)		
MIAI	MI FL 33165		83				
			63				
			84 City		FL 85	Zip Code	7
11. Pursuant office or ragent La	to the provisions of Sections 607.05 egistered agent, or both, in the Stat in familiar with, and accept the obli	02 and 607.1508, Florida Stat e of Florida. Such change was jalions of, Section 607.0505, I	utes, the above-named corpora s authorized by the corpora Florida Statutes.	poration submits this statement for the pition's board of directors. I hereby accep	roose of changi	ng its registered t as registered	<u>-</u>
SIGNATURE							
40	Segrative typed to protect name or registerious:		DTE: Registered Agent signature requi		DATE	TORC IN 12	⊣∞
12.	DP OFFICERS AF	ND DIRECTORS  DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFIC	Char		CR2E034 (9/96)
NAME	LLAURADO, ANA C	been	1,2 NAME			igo 11 regomon	(9)
STREET ADDRESS	10450 SW 27TH ST		1.3 STREET ADDRESS				8
CITY - ST - ZIP	MIAMI FL.		1.4 CITY-ST-ZIP				122
TOLE	DST	DELETE	2 1 TITLE		☐ Char	nge Addition	ᆔᇰ
NAME	LLAURADO, JORGE J		2.2 NAME				
STREET ADDRESS	10450 SW 27TH ST		2.3 STREET ADDRESS				
CITY-ST-7-2	MIAMI FL		2 4 CITY-ST-ZIP				
T₁TLF		DELETE	3 1 TITLE		Char	nge 🔲 Addition	ı
NAME			3 2 NAME				
STREET ADDRESS			3 3 STREET ADDRESS				
CITY-ST-Z#		Doute	3 4. CITY-ST-ZIP		T I Char	- Continue	_
TITLE		DELETE	4.1 TITLE		L Char	nge L Addition	1
NAME			4. 2 NAME 4.3 STREET ADDRESS				
STREET ADORESS							
CITY+ST-7IP TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 T(TLE		☐ Char	noe Addition	n
NAME			5.2 NAME			.,,	
STREET ADDRESS			5.3 STREET ADDRESS				
CITY - ST - ZIP			5.4 CITY - ST - ZIP				
TITLE		DELETE	6.1 TITLE		Char	nge Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY - ST - ZIP			6.4 CITY-SI-ZIP				
14. I do here	by certify that the information supplies independent the	ed with this filing does not qui	alify for the exemption state	ed in Section 119.07(3)(i), Florida Statutes	. I further certify	that the	
				ort as required by Chapter 607, Florida S			۵۱