


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 29, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P02000052081**

1. Entity Name  
**SMALL WORLD CREATIONS, INC.**



Principal Place of Business      Mailing Address

**20504 E 12 MILE RD  
 SAINT CLAIR SHORES, MI 48081**      **20504 E 12 MILE RD  
 SAINT CLAIR SHORES, MI 48081**



03102006    No Chg-P    CRZE034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FCI Number      Applied For  
**32-0018376**      Not Applicable

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

8. Name and Address of Current Registered Agent

**UCC FILING & SEARCH SERVICES, INC.  
 1574 VILLAGE SQUARE BLVD  
 SUITE 100  
 TALLAHASSEE, FL 32309**

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature typed or printed name of registered agent and fee applicable. (NOTE: Registered Agent signature required when re-registering)

**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	D
NAME	MITROWSKI, RON
STREET ADDRESS	20504 E 12 MILE RD
CITY - ST - ZIP	SAINT CLAIR SHORES, MI 480811
TITLE	D
NAME	MITROWSKI, PATTI
STREET ADDRESS	20504 E 12 MILE RD
CITY - ST - ZIP	SAINT CLAIR SHORES, MI 48081
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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 04/12/06-80018-012 150.00

**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 as an attachment with an address, with an other like empowered.

SIGNATURE: *Patricia T. Mitrowski, Director*    17 Mar 06    58679-5180

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Dept of Proc.