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FILED

**Jan 23 1997 8:00am
Secretary of State**

**PROFIT CORPORATION
ANNUAL REPORT
1997**



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

DOCUMENT # F95000004235 (6)

1. Corporation Name:
ULTRA CREATIVE CORP.



Principal Place of Business: **975 ESSEX ST. BROOKLYN NY 11208**
Mailing Address: **975 ESSEX ST. BROOKLYN NY 11208-5419**

3. Date Incorporated or Qualified: **08/31/1995**
3a. Date of Last Report: **03/20/1996**

2. Principal Place of Business		2a. Mailing Address		4. FEI Number 11-2327083		Applied For <input type="checkbox"/> Not Applicable	
21	22	26	27	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24	25	29	30	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85 Zip Code

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	POC	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLATT, ELI	1.2 NAME	
STREET ADDRESS	975 ESSEX ST.	1.3 STREET ADDRESS	
CITY-ST-ZIP	BROOKLYN NY 11208	1.4 CITY-ST-ZIP	
TITLE	VTDC	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SALERNO, ALFRED	2.2 NAME	
STREET ADDRESS	975 ESSEX ST.	2.3 STREET ADDRESS	
CITY-ST-ZIP	BROOKLYN NY 11208	2.4 CITY-ST-ZIP	
TITLE	SD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ADDISON, TODD	3.2 NAME	
STREET ADDRESS	975 ESSEX ST.	3.3 STREET ADDRESS	
CITY-ST-ZIP	BROOKLYN NY 11208	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FOX, ROBERTA	4.2 NAME	
STREET ADDRESS	975 ESSEX ST.	4.3 STREET ADDRESS	
CITY-ST-ZIP	BROOKLYN NY 11208	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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: *Robert Fox* 1/16/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)