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

CITY - ST - ZIP

officer or director of the corpo Block 12 or Block 13 if change

SIGNATURE:

TITLE

NAME STREET ADDRESS

FILED Mar 16 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (6)M07081 CREATIVE BUSINESS PROMOTIONS, INC. Principal Place of Business Mailing Address 7027 W BROWARD BLVD. 7027 W BROWARD BLVD. PLANTATION FL 33317 **PLANTATION FL 33317** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/26/1984 2. Principal Place of Business 2a. Mailing Address Applied For 59-2458454 21 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6, Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible 25 29 30 Personal Property Tax due June 30. Yes Yes 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 Name LIPNACK, MARTIN I. 6829 W COMMERCIAL BLVD 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 300 **B3** FT LAUDERDALE FL 33319 84 City 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature (10/97 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 OFFICERS AND DIRECTORS 13. TITLE DELETE 1.1 TITLE Change Addition LIPNACK, ROCHELLE E. NAME 1.2 NAME 7421 S.W. 20 STREET STREET ADDRESS 1.3 STREET ADDRESS **PLANTATION FL** 14 CiTY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE 3 2 NAME NAME 3.3 STREET ADDRESS STREET ADORESS 34 CITY-ST-ZIP CITY-ST-ZIP DELFTE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS **53 STREET ADDRESS**

5.4 CITY-SY-ZIP

63 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 eath; 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 Pleist 13 of Pleist 13 if provided in the component of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

LERUALA ROCHELLE E LIPRACK 3/9/48

6.1 TITLE

6.2 NAME

Change

■ Addition

DELFTE