

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **F59742** (9)

1. Corporation Name

CREATIVE LEISURE TIME ENTERPRISE, INC.



Principal Place of Business

Mailing Address

% WALTER FASS, JR.
2228 S.W. 67TH AVENUE
MIAMI FL 33155

% WALTER FASS, JR.
2228 S.W. 67TH AVENUE
MIAMI FL 33155

3. Date Incorporated or Qualified
12/28/1981

3a. Date of Last Report
02/23/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-2147613

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FASS, WALTER, JR.
2228 S.W. 67 AVENUE
MIAMI FL 33155

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 607.1506, 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

Signature (typed or printed name of the filer and the filer's title)

Typed Name (typed or printed name of the filer and the filer's title)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME **TS**
STREET ADDRESS **FASS, MADELEINE**
CITY-ST-ZIP **2228 SW 67TH AVE**
MIAMI, FL 00000

TITLE ☐ DELETE

NAME **DP**
STREET ADDRESS **FASS, WALTER, JR**
CITY-ST-ZIP **2228 SW 67TH AVE**
MIAMI, FL 00000

TITLE ☐ DELETE

NAME **DV**
STREET ADDRESS **FASS, MADELEINE**
CITY-ST-ZIP **2228 SW 67TH AVE**
MIAMI, FL 00000

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: **x Walter Fass Jr.** President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Walter Fass, Jr.

1-23-96

305-233-3759

CR2E034 (12/95)