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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Jun 25 1996 8:00 am
Secretary of State

DOCUMENT # P25372 (4)

1. Corporation Name

PROUDFOOT CREATIVE SERVICES, INC.



Principal Place of Business

3260 UNIV BLVD
WINTER PARK FL 32793
US

Mailing Address

C/O CYNTHIA D. GRIFFIN
3260 UNIV BLVD
WINTER PARK FL 32793
US

3. Date Incorporated or Qualified

07/20/1989

3a. Date of Last Report

02/07/1995

2. Principal Place of Business

2a. Mailing Address

21 1700 WEST PALM BEACH LAKES BLVD

26 C/O R.T. NEWTON

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 WEST PALM BEACH

27 1700 W PALM BEACH LAKES BLVD

City & State

City & State

23 FLORIDA

28 W. PALM BEACH, FLORIDA

Zip

Country

Zip

Country

24 33401

25 USA

29 33401

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

85 Zip Code

FL

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

Signature, typed or printed name of registered agent or the corporation

(Print Name of person applying for registration as registered agent)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DP CUNNINGHAM, PAUL 1700 PALM BCH LKS BLVD W PALM BCH FL

TITLE NAME STREET ADDRESS CITY-ST-ZIP

T CALISE, LARRY J 3260 UNIVERSITY BLVD WINTER PARK FL

TITLE NAME STREET ADDRESS CITY-ST-ZIP

S GRIFFIN, CYNTHIA 3260 UNIVERSITY BLVD WINTER PARK FL

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE NAME STREET ADDRESS CITY-ST-ZIP

12 NAME STREET ADDRESS CITY-ST-ZIP

13 TITLE NAME STREET ADDRESS CITY-ST-ZIP

2. TITLE NAME STREET ADDRESS CITY-ST-ZIP

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6. TITLE NAME STREET ADDRESS CITY-ST-ZIP

6.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP

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6.3 TITLE NAME STREET ADDRESS CITY-ST-ZIP

6.4 TITLE NAME STREET ADDRESS 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: MARIE-CLAIRE GEORGE 6/4/96 (44) 181 948
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)