FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P93000002217 (6)**

1. Corporation Name

CREATIVE RESEARCH, INC.

Principal Place of Business	Mailing Address
~~1000 ISLAND BLVD. #2910~~ ~~#2509~~ ~~NORTH MIAMI BEACH FL 33160~~ US	~~1000 ISLAND BLVD. #2910~~ ~~#2509~~ ~~NORTH MIAMI BEACH FL 33160~~ US

3. Date Incorporated or Qualified: 01/11/1993
3a. Date of Last Report: 02/06/1995

4. FEI Number: 65-0383892 — 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 [X] for intangible tax under s. 199.032, Florida Statutes: [X] Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.: 3700 Island Blvd.	26 Suite, Apt. #, etc.: 3700 Island Blvd
22 City & State: C-205	27 City & State: C-205
23 Zip: North Miami Bch. FL	28 Zip: North Miami Bch., FL
24 Zip: 33160 25 Country: U.S.A.	29 Zip: 33160 30 Country: U.S.A

9. Name and Address of Current Registered Agent

~~ENRICO, FORTI~~
~~1000 ISLAND BLVD. #2509~~
~~NORTH MIAMI BEACH FL 33160~~

10. Name and Address of New Registered Agent

81 Name: Enrico, Forti
82 Street Address (P.O. Box Number is Not Acceptable): 3700 Island Blvd
83 C-205
84 City: North Miami Bch. FL 85 Zip Code: 33160

11. Pursuant to the provisions of Section 607.0502 and 607.1948, 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: Enrico Forti — 3/27/96
Registered Agent — Date

12. OFFICERS AND DIRECTORS		
TITLE	P	☐ DELETE
NAME	~~FORTI, ENRICO~~	
STREET ADDRESS	~~1000 ISLAND BLVD #2910~~	
CITY-ST-ZIP	~~NORTH MIAMI BEACH FL 33160~~	
TITLE	S	☐ DELETE
NAME	~~CRANE, HEATHER~~	
STREET ADDRESS	~~1000 ISLAND BLVD. #2509~~	
CITY-ST-ZIP	~~NORTH MIAMI BEACH FL~~	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	P ☒ Change ☐ Addition
12 NAME	Forti, Enrico
13 STREET ADDRESS	3700 Islands Blvd C-205
14 CITY-ST-ZIP	North Miami Beach FL 33160
21 TITLE	S ☒ Change ☐ Addition
22 NAME	Crane, Heather
23 STREET ADDRESS	3700 Island Blvd C-205
24 CITY-ST-ZIP	North Miami Beach, FL 33160
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this 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 attached sheet, with an address.

SIGNATURE: Enrico Forti — 3/27/96 — 932013
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Document #