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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

02-25-1999 90046 011 ***150.00

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FILED

Feb 25, 1999 8:00 am Secretary of State

DOCUMENT # P9500008898

CLIETT CREATIVE GROUP, INC.

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Principal Plac	e of Business	Mailing Address					3 (WE(194) (19 LU)4) E)(C) WE)(C WE)	.0414 30101 40101 10)(0 (0) 4 ; ; 0); (00)	
2882-A REMINGTON GREEN CIRCLE TALLAHASSEE FL 32308 US		2882-A REMINGTO TALL FL 32308 US	on green cir			DO NOT WRITE IN T	'HIS SPACE			
							3. Date Incorporated or Qualifed 08/02/1997			
2. Principal P	lace of Business .	2a. Mailing Addr	Address				4. FEI Number		Applied For	
21		26					59-3292492		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #,					5. Certificate of Status Desired		Additional Required	
City & State 23		City & State	e				6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
Zip	Country	Zip		Countr	у	J	8. This corporation owes the current year	r Intangible	1	
24	25 29		30			Personal Property Tax.	☐ Yes	□No		
	9. Name and Address of Curr	ent Registered Agent					10. Name and Address of New Registe	red Agent		
A				8	l Name	*	•		1	
	tt, robert g Glenview Dr.			8:			s (P.O. Box Number is Not Acceptable) REMINGTON GREEN CIRCLE	 _		
TALL	AHASSEE FL 32303			8:	+					
						CLIAHASSEE FI			L 32308	
11. Pursuant office or reagent. I as SIGNATURE	D Marle	Juit				_	ation submits this statement for the purposes board of directors. I hereby accept the appearance of the purpose statement for the purposes at the purpose statement for the purposes at the purpose statement for the purposes at the purpose statement for the purpose statement for the purposes at the purpose statement for the purposes at the purpose statement for the purposes at the purpose statement for the	e of changing oppointment as	registered	
42	Signature, typed or printed name of registered a	AND DIRECTORS	(NOTE: Regi	13.	in signature	1840HBU W	ADDITIONS/CHANGES TO OFFICERS	AND DIRECT	TORS IN 12	
TITLE	P		LETE	1.1 TITLE		T	7,0071101107011711020110	☐ Change		
	CLIETT, ROBERT G	_1		1.2 NAME					1	
NAME	The state of the s				T ADDDECO	,]				
STREET ADORESS	TALL FL 32308	OIN		1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		`]	
CITY-ST-ZIP TITLE	V		LETE	2.1 TITLE	31-21	+		Change	e Addition	
	CLIETT, CHERYL R			2.2 NAME		1 .	:	. – -	[
NAME .	ASSA A DELABLOTON OPERN	CID	-		T ADDRESS		•		Ì	
T44 51 00000			ľ		ITY-ST-ZIP		d tues			
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NAME		_	ł	3.2 NAME		{	•		-	
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CITY-ST-ZIP			ł	3.4. CITY-	ST-ZIP	{		•	}	
TITLE		DE	LETE	4.1 TITLE				☐ Chang	e Addition	
NAME			ı	4. 2 NAME					1	
STREET ADDRESS				4.3 STREI	T ADDRESS	3			<u> </u>	
CITY-ST-ZIP				4.4 CITY-]				
TITLE		☐ DE	LETE	5.1 TITLE				☐ Change	e Addition	
NAME				5.2 NAME						
STREET ADDRESS			1	5.3 STRE	T ADDRESS	; [{	
CITY-ST-ZIP				5.4 CITY-	ST-ZIP				1	
TITLE		□ Dŧ	LETE	6.1 TITLE		\top		☐ Changi	e Addition	
NAME				6.2 NAME					ļ	
STREET ADDRESS			:	6.3 STREE	T ADORESS	s			Į	
				C A CITY	or tub	1			Ĭ	

14. I hereby certify that the information supplied with this filling 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, with all other like empowered.

SIGNATURE:

1-7-99

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