

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000012120 (8)

1. Corporation Name
CREATIVE REALTY, INC.



Principal Place of Business
**4243 NORTH LAKE BOULEVARD
PALM BEACH GARDENS FL 33410**

Mailing Address
**4243 NORTH LAKE BOULEVARD
PALM BEACH GARDENS FL 33410**

3. Date of Incorporation or Qualified	3a. Date of Last Report
02/10/1995	
4. FEI Number	☒ 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

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent

**BAROT, DILOP
4243 NORTH LAKE BOULEVARD
PALM BEACH GARDENS FL 33410**

10. Name and Address of New Registered Agent
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 607.0902 and 607.1603, 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. I am familiar with, and accept the obligations of, Section 607.0905, Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of Registered Agent

Date

12. OFFICERS AND DIRECTORS	
TITLE	VORIS, BOBBIE ☐ DELETE
NAME	4243 NORTHLAKE BLVD., SUITE D
STREET ADDRESS	PALM BEACH GARDENS, FL, 33410
CITY-STATE-ZIP	DIRECTOR
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY-STATE-ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY-STATE-ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY-STATE-ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY-STATE-ZIP	

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***208.75

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4.8

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 119.04(3)(a), 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: Bobbie Voris 3/27/96 (407) 277-7988
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)