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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000083989 (0) CREATIVE LOGIC. INC.

Principal Place of Business	Mailing Address	11111
10073 N.W. 5TH ST. PLANTATION FL 33324	10073 N.W. 5TH ST. PLANTATION FL 33324-7057	
		3. Date 10/3
2. Principal Place of Business	2a. Mailing Address	4. FEI N

FILED Apr 25 1997 8:00am Secretary of State

Principal Place of Business Mailing Address 10073 N.W. 5TH ST. PLANTATION FL 33324 PLANTATION FL 33324-70				***************************************	,				
						3. Date Incorporated or Quali 10/30/1995		Date of Lar 5/01/199	
2. Principal Plac	ce of Business	2e. Mailing Address	S			4. FEI Number 65-0620699			Applied For
Suite, Apt. #.	etc	26 Suite, Apt. #, etc	C.	······································		00 0020088		\$8.7	Not Applicab 5 Additional
2		27				5. Certificate of Status Desired	d 🗆	·	Required
City & State		City & State				6. Election Campaign Financia			00 May Be
23 Ζφ	Country	28 Zip	Col	untry		Trust Fund Contribution			ed to Fees
2117	25	29	30	or itry		8. This corporation has liabilit Florida Statutes	y for intangi Yes		er s. 199,032,
	9. Name and Address of Cu			Ι		10. Name and Address of Ne			
	R, DERICK		•	81 Na	me				
	N.W. 5TH ST.			82 Str	eet Addre	ess (P.O. Box Number is Not Acc	eptable)		
PLANI	TATION FL 33324			83			<u>-</u>	·	
				84 Cit	у		F	85 2	ip Code
SIGNATURE			,			on's board of directors. I hereby			
12.		AND DIRECTORS	(NOTE: Registere			id when reliastating) ADDITIONS/CHANGES TO (DATE	ND DIRECT	
5J 12.	OFFICERS D	·	(NOTE: Registere 13.	ad Agent sign		id when reinstaling)	DATE		
12. THE NAME	OFFICERS D WILDER, DERICK	AND DIRECTORS	(NOTE: Registere 13.	ad Agent sign ITLE IAME	nature require	id when reinstaling)	DATE	ND DIRECT	
12. THE NAME STREET ADDRESS	OFFICERS D	AND DIRECTORS	(NOTE: Registers 13. TE 11 T 1.2 M	ad Agent sign TITLE IAME STREET ADDR	nature require	id when reinstaling)	DATE	ND DIRECT	
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Too increase details that the movement supplied with his liting does not quarity for the exemption stated in Section 119.07(3)(f), Florida Statutes. Turner certify that the information indicated on this adjust report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 3 if changed, or by an attachment with an address.

SIGNATURE: