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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000094790 (9)

FILED May 15 1997 8:00am Secretary of State

CREATIVE DESIGNS & MARKETING INC. Principal Place of Business Mailing Address P.O. BOX 970115 BOCA RATON FL 33428 MARKETING INC.									
						3. Date Incorporated or Qualified 12/14/1995		te of Last 7/1996	Report
	Place of Business	2a. Mailing	Address	······································		4. FEI Number			oplied For
<u> 1394</u> ر	#, To 09 RD	26				65-0641543			Not Applicable
BOOK	Hn#71	27 Suite, A	Apt. #, etc.			5. Certificate of Status Desired			Additional Required
City & Sta	en Aeres fu	City & S	State			Election Campaign Financing Trust Fund Contribution			D May Be to Fees
7ip 4 33y	Country	Zip		Countr 30	У	8. This corporation has liability for	intangible t	tax under	·
1 221	9. Name and Address of Curr		gent	1301		10, Name and Address of New Re			
WEI	SSMAN, BESS			81	Name				
2320	00 CAMINO DEL MAR . 403			8	Street Add	dress (P.O. Box Number is Not Acceptal	ble)		
	CA RATON FL 33433			8:	3				
				84	City		FL	85 Zij	Code
		502 and 607.1508, ate of Florida Such ligations of, Section	, Florida Statut i change was n 607.0505, Fl	les, the aborauthorized borida Statute	ve-named cor by the corpora es.	orporation submits this statement for the ation's board of directors. I hereby acce	purpose of pt the appo	changing pintment a	its registered is registered
SIGNATURE	Signature, typed or printed name of registered OFFICERS A	agent and little If applicable	le (NO1	FE Registered A	gent signature requ	orporation submits this statement for the pation's board of directors. I hereby accellured when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE CERS AND		DRS IN 12
SIGNATURE 12. TITLE NAME	Signature, typed or printed name of registered OFFICERS A D WEISSMAN, BESS	agent and little If applicable		TE Registered Ap 13. 1.1 TITLE 1.2 NAME	gent signature requ	guired when reinstating)	DATE CERS AND	DIRECTO	ORS IN 12
SIGNATURE 12. TITLE NAME SIREEL ADDRESS	Signature, typed or printed name of registered OFFICERS A D WEISSMAN, BESS 23200 CAMINO DEL MAR	agent and little If applicable	le (NO1	13. 1.1 TITLE 1.2 NAME 1.3 STREE	gent signature requ	guired when reinstating)	DATE CERS AND	DIRECTO	ORS IN 12
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14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j). 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 eath; that 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

DAD QUINNER THE OUTFIETERS HYMAN STATES OF STRIP HYMAN

(561)487.5684 Objure From # 0007224