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

PROFIT CORPORATION ANNUAL REPORT 1998 DOCUMENT #



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P9600005664 (3)

B CREATIVE, INC.

	Principal Place of Business Mailing Address					T (SOURCE) BLA TOLIO ONUL ADUL ODIUS ADUL ADUL ADUL ADUL ANILO BULLO BUL			
13535 SOUTHWEST 62ND STREET #3 MIAMI FL 33183		PO BOX 654602 MIAMI FL 33265			DO NOT WRITE IN THIS SPACE				
	William 12 00 100					3. Date Incorporated or Qualified 01/18/1996			
i . '	2. Principal Place of Business	2a. Mailing Address	3			4. FEI Number Applied	For		
	21 26					65-0655634 Not App	olica		
	Suite, Apt. #, etc. Suite, Apt. #, etc. 22 27			•		5. Certificate of Status Desired S8.75 Addition Fee Require			
	City & State	City & State			8. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
; ;	Zip Country 24 25	Zip 29	30 Co.	intry		8. This corporation owes or has paid the current year Intangit Personal Property Tax due June 30.			
	9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
	TORRA, BERNIE			81	Name				
	1353\$ SOUTHWEST 62ND STREET #3			82	Street Address (P.O. Box Number is Not Acceptable)				
i i	MIAMI FL 33183			83					
				84	City	FL 85 Zip Code			

11, Pursuant t office or re agent. Lar	to the provisions of Sections 607.0502 and 607.1508, Florida egistered agent, or both, in the State of Florida. Such changi m fa miliar with, and accept the obligations of, Section 607.05	i Statutes, the above-hamed c e was authorized by the corpo 505, Florida Statutes.	orporation submits tris states tradition's board of directors.	hereby accept the appointment as	registered
SIGNATURE	Signature, typed or printed name of registered agent and title if sppt cable	(NOTE: Registered Agent signature re		DATE	
12.	OFFICERS AND DIRECTORS	13.		ES TO OFFICERS AND DIRECTO	RS IN 12
TITLE	PSTD DELE			Change	Addition
NAME	TORRA, BERNIE	1.2 NAME			
STREET ADDRESS	13535 SOUTHWEST 62ND STREET	1.3 STREET ADDRESS			
	MIAMI FL 33183	1.4 CITY-ST-ZIP			
CITY-ST-ZIP	VP DELE			Change	Addition
TITLE					
NAME	ALPHONSO, GEORGE	2.2 NAME		* · · · · · *	
STREET ADDRESS	16413 STONEHAVEN ROAD	2.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI LAKES FL 33014	2. 4 CITY - ST - ZIP			4 4 4 4 5 5 4
TITLE	☐ DELI	ETE 3.1 TITLE		Change	Addition
NAME		3.2 NAME			
STREET ADDRESS		3.3 STREE1 ADDRESS			
CITY-ST-ZIP		3.4. CITY - ST - ZIP			
TITLE	DELI	ETE 4.1 TITLE		☐ Change	Addition
NAME		4. 2 NAME			
STREET ADDRESS		4.3 STREET ADDRESS			
CITY-ST-ZIP		4.4 CITY - ST - ZIP			
TITLE	☐ DELI		***	☐ Change	Addition
NAME		5.2 NAME			
STREET ADDRESS		5.3 STREET ADDRESS			
		5.4 CITY-ST-ZIP			
CITY-ST-ZIP	DELU			Change	Addition
TITLE					
NAME		6.2 NAME			
STREET ADDRESS		6.3 STREET ADDRESS			
CITY-ST-ZIP		6.4 CITY - ST - ZIP			

14. Thereby certify that the information supplied with the filing 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 of 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 affactor of the corporation or the receiver of the corporation of the corporation

FILED

Apr 27 1998 8:00am

Secretary of State

Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees