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

PROFIT CORPORATION ANNUAL REPORT

1998

CCH ALABAMA II, INC.



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

P96000028582 (0)

NAME CHANGED TO:

Principal Place of Business

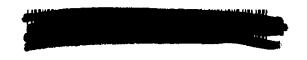
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4243 NORTHLAKE BLVD STE D PALM BEACH GARDENS FL 33410 Mailing Address

4243 NORTHLAKE BLVD STE D PALM BEACH GARDENS FL 33410

CREATIVE DEVELOPMENT, INC.

FILED Jan 30 1998 8:00am Secretary of State



					DO NOT WRITE IN THIS SP.	ACE
					3. Date Incorporated or Qualified	
					04/01/1996	
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			65-0663772	Not Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
22		27			5. Certificate of Status Desired	Fee Required
City & State City & State					6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country Zip		Cour	Country 8. This corporation owes or has paid the current year Intangible		nt year Intangible
24	25	29	30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Current	Registered Agent			 Name and Address of New Registered Ag 	ent
BAROT, DILIP				81 Name		
4243 NORTHLAKE BLVD STE D				B2 Street Address (P.O. Box Number is Not Acceptable)		
PALM BEACH GARDENS FL 33410				Street Address (P.U. Box Number is Not Acceptable)		
THE SECTOR COMPLETO LE SOTTO				B3		
\wedge						
•				B4 City	FL	85 Zip Code
#4 Durayant	to the provisions of Paptions 607 0002	and CO2 1EO0 Florida Ct	alutes the ab			an along its registered
office or r	registered agent, or both, in the State of	of Florida. Such change w	as authorized	by the cor	d corporation submits this statement for the purpose of cl reporation's board of directors. I hereby accept the appoir	ntment as registered
agent I a	ım fa miliar with, a nd accept the obligat	ions of, Section 607.0505	5, Florida Statu	ites.		-
SIGNATURE						
				Agent signatur	c required when reinstating) DATE	PECTORONIU 40
12.				r	ADDITIONS/CHANGES TO OFFICERS AND D	Change Addition
	BAROT, DILIP	L) better	1.1 101		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1 Citalings (Abdultion)
NAME	MALE MODELLI AMERICAN COMP. D.			Barot, Dilip		
STREET ADDRESS	BALLA DELOIT OLODENO EL COLLO			1.3 STREET ADDRESS 4243-D Northlake Blvd.		
CITY-ST-ZIP						33410
TITLÉ	SVP	☐ DELETE	2.1 TIT	.E	į L	Change 🔲 Addition
NAME				AE.		
STREET ADDRESS				EET ADDRESS		J
CITY-ST-ZIP	PALM BEACH GARDENS FL 33410			Y-ST-ZIP]	
TITLE	VP	DELETE	3 1 TITI	.E		Change Addition
NAME				ME		Ì
STREET ADDRESS	DALLA DELOIL CADDENC EL COLLO			EET ADDRESS		1
CITY-ST-ZIP				Y-ST-ZIP		
TITLE	\$	☐ DELETE	4.1 TIT			Change Addition
NAME	LANCZI, ANITRA D		4. 2 NA	MF		
STREET ADDRESS	AGAIN BEOMEN ALEM DELED OFFE D			FET ADDRESS		1
CITY-ST-ZIP	PALM BEACH GARDENS FL 33					
TITLE	T	K DELETE	5.1 THI	r - S1 - ZIP	 	Change Addition
	ADAMS, BRUCE W	D breeze	1		/ /	A CHIEFE C. PURINITI
NAME	TADORESS 4243 NORTHLAKE BLVD STE D			52 NAME		1/27
STREET ADDRESS				EET ADDRESS	I #19	(1) ()
CITY-ST-ZIP	FALM BEAUTI GARDENS FL 33			/-ST-ZIP	10/-	
TITLE		☐ DELETE	6 1 TITL		00000241713	Change Addition
NAME			6.2 NAM	4E	-01/30/9801032031	ļ
STREET ADDRESS			6.3 STR	EET ADDRESS	***150.00	ľ
CITY-ST-ZIP			6.4 CIT	/- S1- ZIP		

14. I hereby certify that the information supplied with this 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 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 13 if changed, or on an attachment with an address.