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

PROFIT **CORPORATION ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 08 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

-	MENT # P96000 CREEK INC.	0045819 (5)				28 /11/ 28 /11/ 28 /11/11/	<u> </u>	
Principal Place of Business Mailing Address								
6941 NE 3 AVE MIAMI FL 33138 US		PO BOX 530744 MIAMI FL 33153 US		DO NO	WRITE IN TH	IS SPACE		
					3. Date Incorporated or Qu 05/23/1996			
	2. Principal Place of Business 2a. Mailing Address				4. FEI Number		<u> </u>	oplied For
21 26 Sulte, Apt. #, etc. Suite, Apt. #.					65-0673905			ot Applicable Additional
22		ļ ₁	-		5. Certificate of Status Desi	red 🔲		Additional equired
City & State		City & State	City & State		6. Election Campaign Finar Trust Fund Contribution	ncing		May Be to Fees
Zip 24	Country Z/p 29		30 Personal Proper		Personal Property Tax do			
	9, Name and Address of Curre	nt Registered Agent			10. Name and Address of I	lew Registere	d Agent	
JORDAN, PETER B			81	Name				
920		82	Street	Address (P.O. Box Number is Not A	ceptable)			
MIA	MI FL 33150		83					
							····•	
			64	City		F	65 Zip (Code
office or r agent. I a SIGNATURE	egistered agent, or both, in the State m familiar with, and accept the oblig i Signature, lyied or profed name of registered ag	e of Florida Such change was lations of Section 607.0505, Floridate (NO)	authorized by orida Statutes £ Registered Age	the corp	corporation submits this statement for attended to continue the statement of the continue the continue the continue that the continue the continue that the	y accept the a	ppointment as	registered
12.	OFFICERS AN	OFFICE RS AND DIRECTORS 13.			ADDITIONS/CHANGES TO	J OFFICERS A	Change	Addition
NAME	BENDER, MICHAEL A	_ vicin	1.1 THILE 1.2 NAME		V/D MTOUATE	ő.	ZZ Change	LI AGUIROII
STREET ADDRESS	9215 NW 5TH AVENUE		1.3 STREET	ADDRESS I		ENDER, MICHAEL A 215 NW 5TH AVENUE		
CITY-ST-ZIP	MIAMI FL 33150			F-ZIP		TAMT PL 33150		
TITLE	D	DELETE	2.1 TITLE		P/D		Change	☐ Addition
NAME	J OR DAN, PETER B		2.2 NAME			ORDAN, PETER B]
STREET ADDRESS	9206 NW 4TH AVENUE		23 STREET ADDRESS 9		9206 NW 4TH AVE			
CITY-ST-ZIP	MIAMI FL 33150			ST - ZIP	MIAMI, 3L 3315)	Change	Addition
TITLE NAME		DELETE 3.1 TO		l			L. J Gridinge	☐ Addition
STREET ADDRESS				ADDRESS	,			
CITY - ST - ZIP	i i		3.4. C/TY-S					l
TITLE	·	DELETE 4.1 TI					Change	Addition
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET	ADDRESS				
CITY ST-ZIP		The section	4.4 CITY-S	I - ZIP				1 1 1 1 1 1 1 1
TITLE	. •	☐ DELETE 5.11		l			☐ Change	∐ Addition
NAME STOREST ADDRESS			5.2 NAME 5.3 STREET	ADDRESS				
STREET ADDRESS City-St-Zip			5.3 STREET					ļ
TITLE			6.1 TITLE	1 - KIE			Change	Addition
NAME			6.2 NAME	j			-	
STREET ADDRESS			6.3 STREET	ADDRESS				
				l l	Į.			l l

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 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 13 or Block 13 if changed, or on an attachment with an address. 7-6-1998