CORPORATION REINSTATEMENT	Kather Secreta	RTMENT OF STATE ine Harris ry of State corporations		AND FILED G 30 AH II: 58
DOCUMENT # 1960000 48883 1. Corporation Name			SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Creative Labs, Inc.				
2. Principal Office Address		3. Mailing Office Address		
350 Camino Gdrs Suite, Apt. #, etc. Suite # 200	Sulte, Apt. #, etc.			alkind
City & State	City & State		Date Incorporated or Qu To Do Business in Florid FEI Number	Applied For
Zip Country	Zip	Country	6. CERTIFICATE OF STATUS D	Not Applicable
33432 U.S.A	7. Name and 4	Address of Current Registers		to: a Cest tinate of Status
Street Address (P.O. Box Number	th Pine Island	l Road		33915420 13/0001056014 \$900.00 ****900.00
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503 F.S. Signature of Registered Agent SPECIAL ASSISTANT SECRETARY Date 8-23-2000 REGISTERED AGENT MUST SIGN 9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)				
Titles Name of				Clty / State / Zip
D Ira Smole	V 2494		d. #A:3 Bara	Baton, FL 33432
	REM	STATEME	NT 99-0	2
			,	M
O. I certify that I am an officer or director or the this reinstatement application, the reason for owed by the corporation have been paid and on this application is true and accurate, and the second secon	the names of individuals listed on	the coporate name satisfies the third state of the satisfies the third satisfies the s	he requirements of section 607. exemption under section 119.0 path.	0404 b. C430404 E.O. 45-1-14-1-