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Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000057951

1. Corporation Name
CREATIVE BUSINESS, CORP.

Principal Place of Business
14919 SW 80TH ST # 204
MIAMI FL 33193
US

Mailing Address
14919 S.W. 80TH STREET #204
MIAMI FL 33193

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
07/09/1996

4. FEI Number
65-0683084

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business
21 14919 SW 80 STREET

Suite, Apt. #, etc.
22 204

City & State
23 MIAMI FLORIDA

Zip
24 33193

Country
25 USA

2a. Mailing Address
26 14919 SW 80 STREET

Suite, Apt. #, etc.
27 204

City & State
28 MIAMI FLORIDA

Zip
29 33193

Country
30 USA

9. Name and Address of Current Registered Agent

SERAU, MARCELO
14919 S.W. 80TH STREET #204
MIAMI FL 33193

10. Name and Address of New Registered Agent

81 Name BRODA, MONICA
82 Street Address (P.O. Box Number is Not Acceptable) 14919 SW 80 STREET # 204
83
84 City MIAMI FL 85 Zip Code 33193

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/17/99

12. OFFICERS AND DIRECTORS

TITLE P
NAME SERAU, MARCELO
STREET ADDRESS 14919 S.W. 80TH STREET #204
CITY-ST-ZIP MIAMI FL 33193

TITLE ST
NAME BRODA, MONICA C
STREET ADDRESS 14919 S.W. 80TH STREET #204
CITY-ST-ZIP MIAMI FL 33193

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P
1.2 NAME BRODA, MONICA C.
1.3 STREET ADDRESS 14919 SW 80 STREET # 204
1.4 CITY-ST-ZIP MIAMI FLORIDA 33193

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-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 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/17/99

305 4719648

CR2E034 (11/98)