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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000065349 (8)

CREATIVE REAL ESTATE, INC.

Principal Place of Business Mailing Address 1200 MALABAR ROAD SE #4 1200 MALABAR ROAD SE #4 PALM BAY FL 32909 PALM BAY FL 32907-2527 3. Date Incorporated or Qualified 3a. Date of Last Report 08/05/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 28 Trust Fund Contribution Added to Fees 23 Country Zip Country Zip 6. This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent В1 Name AVCHEN, DAVID 1200 MALABAR ROAD SE #4 82 Street Address (P.O. Box Number is Not Acceptable) PALM BAY FL 32909 83 84 City Zip Code 85 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12, OFFICERS AND DIRECTORS 13. DELETE Addition Channe 1.1 TITLE TITLE LIFORD, ROBIN 1.2 NAME NAME 1805 COREY ROAD 1.3 STREET ADDRESS STREET ADDRESS MALABAR FL 32950 1.4 CITY-ST-ZIP CITY-S1-ZIP Addition DELETE Change D TITLE 2.1 TITLE SCHUTTE, THOMAS E 2.2 NAME NAME 696 MURSET AVENUE SE 2.3 STREET ADDRESS STREET ADDRESS PALM BAY FL 32909 CITY - ST - ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE AVCHEN, DAVID 3.2 NAME NAME 686 NORSE STREET NW 3.3 STREET ADDRESS STREET ADDRESS PALM BAY FL 32907 3.4. CITY-ST-ZIP City+St-2iP Addition DELETE Change TITLE 4.1 TITLE NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CHY-ST-ZIP

14. I do 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 conforation or the required to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13

6.4 CITY - ST - ZIP

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

TITLE NAME

STREET ADORESS

STREET ADDRESS

CITY-ST-ZIP

CITY - S1 - ZIP

DELETE

DELETE

Change

Change

Addition

☐ Addition

FILED

Feb 18 1997 8:00am

Secretary of State