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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000081492 (6)

CREATIVE ALLIANCE ARTS, INC.

Principal Place of Business Mailing Address									I INDRIGUE OF BEAUTION OF STATES				
7719 GRAMERCY COURT ORLANDO FL 32818					7719 GRAMERCY COURT ORLANDO FL 32818-4750								
									3. Date Incorporated or Qualif 09/30/1996	ied	3a. Da	ate of Last F	Report
				— —	2a. Mailing Address				4. FEI Number				oplied For
21	21 2 Suite, Apt. #, etc.			26	Suite, Apt. #, etc.								ot Applicable
22	¬ '''' '			27	27				5. Certificate of Status Desiron				Additional equired
23				28				Election Campaign Financir Trust Fund Contribution	ng			May Be to Fees	
24	Zip	Country 25		29	30		ountry	/	This corporation has liability Florida Statutes	ration has liability for Intangible tax under s. 199. dutes ☐ Yes 🔀 No			: 199.032,
		9. Name	and Address of C	urrent Regist	ered Agent]	T	10. Name and Address of Nev	v Reg	jistered	Agent	
GALETTA, JON D								Name					
7719 GRAMERCY COURT							82	Street A	ddress (P.O. Box Number is Not Acce	ptabl	e)		
ORLANDO FL 32818							83			· 			
						63							
							84	City			FL	85 Zip	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutos, the above-named corporation submits this statement for the purpose of changing its reg 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 regis agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.												ts registered registered	
SIGNATURE Signature, typod or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) [5]										DATE			
12			OFFICER	S AND DIREC		1;	3.		ADDITIONS/CHANGES TO C	FFICI	ERS AND	DIRECTOR	RS IN 12
	TITLE D.		10N D		☐ DELE	TE 1.1	TITLE					Change	Addition
		GALETTA		D ADT 401			1.2 NAME						
STREET ADDRESS CITY-ST-ZIP		6628 TANGLEWOOD BLVD., APT. ORLANDO FL 32821			#811		1.3 STREET ADDRESS						
TITL		D	O I L DEOE I		DELE		CITY-S	ST - ZIP				Change	Addition
NAN		MYERS, I	BRIAN K			I -	NAME			.,		L Ghange	[_] Audition
			AMERCY COURT	•				ADDRESS					
			O FL 32818				2. 4 CITY-ST-ZIP						
TITL	.E	D			☐ DELE		TITLE					☐ Change	Addition
NAM	AE .		o, richard j			3.2	NAME.						
STR	STREET ADDRESS 3209 FOXWOOD BLVD.			3.3 STREET ADDRESS		ADDRESS							
CITY-ST-ZIP ZEPHRYHILLS FL 33543				3.4. CHY-ST-ZIP		ST-ZIP							
TITL	-				∐ DELE	TE 4.1	TITLE		•			Change	Addition
NAN						1.	2 NAME						
	EET ADDRESS							ADDRESS					
TITL	r-ST-ZIP				DELE		CITY-S	51- 7 (P				Change	Addition
NAA					נייו טנננ	4	TITLE NAME					Change	Addition
	1	ភា ១ ៨១	e est					ADDRESS					
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	E (3193	14 1534 1			☐ DELE		TITLE	41 ° Z II				Change	Addition
NAM		10 P. 17	•		•		NAME						
STR	EET ADDRESS							ADDRESS					

-ST-ZIP

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 am on 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.

FILED

May 08 1997 8:00am

Secretary of State