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 # P96000097398 (7)

CREOLE CONSULTING CORP.

Principal Plac	e of Business	Mailing Address				COLLE INVITATED LIVIA (018) (011 E001
1460-N N.W. 107 AVE 1460-N N.W. 107 AVE MIAMI FL 33172 MIAMI FL 33172-2733						
					3. Date Incorporated or Qualified 11/26/1996	3a. Date of Last Report
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		[26]			Not Applicable	
Suite, Apt	. #, 8(C.	Suite. Apt. #, etc.		5. Certificate of Status Desired	S8.75 Additional Fee Required	
City & Stal	te .	City & State			6 Clastic Compaint Financia	
23		28			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	7ip	Count	ry	8. This corporation has liability for	
24	25	29	30			Yes No
	9. Name and Address of Cur	rent Registered Agent			10. Name and Address of New Re	gistered Agent
•				4 City ve-named corporates.	poration submits this statement for the p tion's board of directors. I hereby acce	
	Signature, typed or printed name of registered			gent signature requ	fred when reinstaling)	DATE
12.	D OFFICERS A	AND DIRECTORS	13.	————	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12 Change Addition
NAME	CORRALES, JORGE	C Dittit	1.2 NAME			Change Addition
STREET ADDRESS	1480-N N.W. 107 AVE			ET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33172		1.4 CITY-			
TITLE	0	DELETE				Change Addition
NAME	VELEZ, ALAN R		2.2 NAMI			_ , , _
STREET ADDRESS	1460-N N.W. 107 AVE			E1 ADDRESS		
CITY-ST-ZIP	MIAMI FL 33172		2. 4 CHY	-S1-ZIP		
TITLE	0	DELFTE	3 1 TITLE			Change Addition
NAME	SANTOS, ROLANDO R		3.2 NAME	í.		
STREET ADDRESS	1460-N N.W. 107 AVE		3 3 STRE	ET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33172		3.4. CITY	- ST - 7(P		
TITLE		DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAM	ıξ		
STREET ADDRESS			4,3 S1RE	E1 ADDRESS		
OUTY OF THE			4.4.600	PT 700		

14. I do hereby certify that the information supply:d 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 of 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 directorio the corporation for 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 Bligk 13 if priangled of in an attachment with an address.

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

DELFTE

DELETE

West Day 1

TITLE

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

03/06/97

Change

Change

Addition

■ Addition

FILED

Apr 30 1997 8:00am

Secretary of State