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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P96000102599 (3)

FILED Apr 14 1997 8:00am Secretary of State

1. Corporation Name CREATEABILITY COMMUNICATIONS, INC. Principal Place of Business Mailing Address 2315 BEACH BLVD SUITE 304 JACKSONVILLE FL 32250 JACKSONVILLE FL 32250-4055									
						3. Date Incorporated or Qualified 12/13/1996	3a. Date of Last Report		
	Place of Business	2a. Mailing Address				4. FEI Number	··*	<u> </u>	Applied For
Suite Ap	t # ple	Suite Apt # etc	Suite Apt. #, etc.			59-3404 300			Not Applicable
22 27						5. Certificate of Status Desired			Additional Required
City & State City & Sta			e			6. Election Campaign Financing \$5.00 May Be			
23		28	· · · · · · · · · · · · · · · · · · ·			Trust Fund Contribution Added to Fees			
Zip	Zip Country Zip		<u>⊢</u>			8. This corporation has liability for intangible tax under s. 199.032,			
24	25 9. Name and Address of Curr	29 ent Registered Agent	30	Ι		Florida Statutes 10. Name and Address of New Re	Yes [
THI	EALE, RUDY C	on neglective rigent		81	Name	10. Hante and Address of New Yor	gretered i	19011	
	15 BEACH BLVD			82	Street Addr	ess (P.O. Box Number is Not Acceptab	اما		
SUITE 304					Street Addi	ess (P.O. Box number is not Acceptable)			
JA(CKSONVILLE FL 32250			83					
			!	84	City		FL	85 Zij	Code
11. Pursuan office or agent I	registered agent, or both, in the Sta ani familiar with, and accept the obt	ate of Florida. Such change was Ingations of, Section 607.0505, F	s authorize Florida Stal	d by tute:	y the corporati s.	oration submits this statement for the p ion's board of directors. I hereby accep	urpose of it the app	changing olntment a	its registered is registered
	Styrialize, typed or printed name of registered:	agent and title 4 applicable (NO AND DIRECTORS		d Age	ent signature requir	ed when reinstating)	DATE	DIDEAT	200 111 40
12. TILE	PCEO	DELETE	13.	TLE		ADDITIONS/CHANGES TO OFFIC	EHS ANL	Change	
NAME	THEALE, RUDY C		1.2 N		ļ				
STREET ADDRESS			1.3 \$1	TREET	F ADDRESS				
CITY - ST - ZIP	JACKSONVILLE FL 32250		1,4 CHTY -		ST - ZIP				
TITLE	V	DELETE 211		21 THLE				Change	Addition
NAME	ALLNOCK, BRIAN E		•	2.2 NAME					
STREET ADDRESS	IACKCOARMITE EL 2005O		1 "		T ADDRESS				
CITY - ST - ZIP TITLE				2.4 City-ST-ZiP 3.1 Title				Change	☐ Addition
NAME		- Peter	3.2 N					ondingo	L) Naditali
STREET ADDRESS					T ADDRESS				
City-St-ZiP			3.4. C	ify-s	ST-ZIP				
TITLE		☐ DELETE	4,1 Ti	TLE				Change	Addition
NAME			4.2 N	IAME	}				
STREET ADORESS	5		4.3 \$1	TREET	T ADDRESS				
011Y - S1 - 7/P		☐ DELETE	4.4 CITY -		ST-ZIP			Change	Addition
TITLE		☐ 0ELE1E	5.111	5.1 TITLE				LI Change	- The Modified
NAME PROFESSION	1		5 2 5 1						
	- 1		5.2 N/		T ADDDECO				
STREET ADDRESS	i		5.3 \$1	TREET	F ADDRESS				
CHY-ST-ZIP TITLE		☐ DELETE	5.3 \$1	TREET ITY - S	ADDRESS ST-ZIP			Change	Addition
Crt v - ST - ZIP		☐ DELETE	5.3 S1 5.4 CI	TREET ITY - S TLE	l .			☐ Change	Addition
CHY-ST-ZIP TITLE		☐ DELETE	5.3 ST 5.4 CI 6.1 TI 6.2 N	TREET ITY - S TLE AME	l .	ader (voc de presentante) en		Change	Addition
CHY-ST-ZIP TITLE NAME		☐ DELETE	5.3 ST 5.4 CI 6.1 TI 6.2 N/ 6.3 ST	TREET TLE AME TREET	ST-ZIP	aren and a second a		Change	Addition

Too learnly contribute mornation supplies with this hing obes not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. 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.

SIGNATURE: