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

PROFIT CORPORATION ANNUAL REPORT

1998

2. Principal Place of Business

Suite, Apt. #, etc

City & State

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23

24

Zip



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P97000011996 (0)

Country

CORPORATE CREATIONS ENTERPRISES, INC.

9. Name and Address of Current Registered Agent

25

PALM BEACH GARDENS FL 33418

4521 PGA BLVD. #211

PHENOM INTERNATIONAL, INC.

Principal Place of Business	Mailing Address	
2828 NW 4TH AVE.	2828 NW 4TH AVE.	
OCALA FL 34475	OCALA FL 34475	

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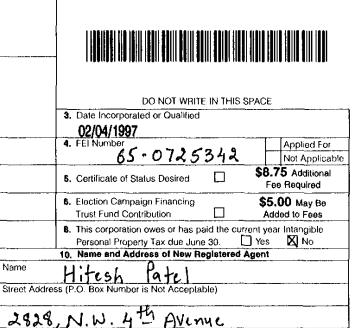
2a. Mailing Address

City & State

 $Z_{\rm ID}$

Suite, Apt. #, etc.

FILED Jan 20 1998 8:00am Secretary of State



Zip Code

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 lamiliarly ith, and accept the appointment as registered agent. I am lamiliarly ith, and accept the appointment as registered agent. I am lamiliarly ith, and accept the appointment as registered agent. I am lamiliarly ith, and accept the appointment as registered agent. I am lamiliarly ith, and accept the appointment as registered agent. I am lamiliarly ith, and accept the appointment as registered agent. I am lamiliarly ith, and accept the appointment as registered agent. I am lamiliarly ith, and accept the appointment as registered agent. I am lamiliarly ith, and accept the appointment as registered agent. I am lamiliarly ith, and accept the appointment as registered agent. I am lamiliarly ith, and accept the appointment as registered agent. I am lamiliarly ith, and accept the appointment as registered agent. I am lamiliarly ith, and accept the appointment as registered agent. I am lamiliarly ith accept the appointment as registered agent. I am lamiliarly ith accept the appointment as registered agent. I am lamiliarly ith accept the appointment as registered agent. I am lamiliarly ith accept the appointment as registered agent. I am lamiliarly ith accept the appointment as registered agent. I am lamiliarly ith accept the appointment as registered agent. I am lamiliarly ith accept the appointment as registered agent. I am lamiliarly ith accept the accept the appointment accept the DATE (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Addition DELETE Change TOTALE D 1.1 TITLE NAME PATEL, HITESH 1.2 NAME 2828 NW 4TH AVE. STREET ADDRESS 1.3 STREET ADDRESS OCALA FL 34475 CITY-ST-ZIP 1.4 CITY-ST-ZIP DILETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - S1 - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - 2IP CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-S1-ZIP CITY-ST-ZIP DELETE Change 5.1 TITLE Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6 1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP

Country

81 Name

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14. I hereby cortify 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 of supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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:

259-962-6021