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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

| Solide, Apt. #, etc. Sule, Apt. #, etc. Sule, | 1. Corporation | on Name | 00-0120 (0) | | | |
|--|---|---|------------------------------------|--|---|---|
| Principal Piaco of Business Main's Address 17555 COLLINS AVE MANN BCH FL 23160 DO NOT WRITE NI THIS SPACE 3. Date Incorporated or Qualified 05/14/1997 2. Principal Piaco of Business 3. Date Incorporation of Status Desired 3. Solid, Apt. 4, etc. 2. For County 3. Solid, Apt. 4, etc. 3. Country 3. Solid, Apt. 4, etc. 3. Solid Piaco of Business 3. Solid Piaco of Business | UNIVE | RSAL GAMING DEVELOPER | RS & CONSULTANTS IN | C. | | |
| Principal Place of Business Mailing Acfress 1755 SOLUNS AVE MAMA BCH FL 33160 | O CONTRACT | HONE GRAVIII O DEVELOI EI | o a concocianto in | 0. | LANGER BEI DEN FREIE LANGER MUTTE MAINT MAINT MARTE | BIORD INIOI TIRLY HOLL BEHINDS |
| Principal Place of Business Mailing Address 1755 COLINS AVE | | | | | | |
| 1765 COLINS AVE MAM BCH FL 33160 DO NOT WRITE IN THIS SPACE | Principal Plac | ce of Business | Mailing Address | | { | #1064 ff |
| MAMI BCH FL 33160 MISSING PL | | | - | | | |
| 2. Principal Place of Business Za. Mailing Address Same Incorporated or Qualified O5/14/1997 Applied for Applied for Salida O5/14/1997 Applied for Appli | | | | | | |
| ## Principal Place of Business 2a. Mailing Address 2b. Mailing | | | | | DO NOT WRITE IN TH | IIS SPACE |
| 2. Principal Place of Business 28. Mailling Address 4. FEI Number Applied For Solid Apt 8, etc. 28. Illis, Apt 8, etc. 28. Illis, Apt 8, etc. 29. Illis, Apt | | | | | Date Incorporated or Qualified | |
| Suite, Apt. #, etc. | _ | | | | | |
| Solide Apt P. etc. 25 Use, Apt P. etc. 27 | 2. Principal F | Place of Business | 2a. Mailing Address | | | Applied For |
| Scorlinate of Sature Desired Security | 21 | | | | 65-0148047 | |
| City & State Country Lip Lip Country Lip Country Lip Country Lip Country Lip Lip Country Lip Country Lip Country Lip Lip Country Lip Country Lip Lip Country Lip Country Lip Lip Lip Country Lip Lip Lip Country Lip Lip Lip Lip Lip Lip Lip Li | <u> </u> | . #, etc. | ├ ─ | | 5. Certificate of Status Desired | |
| 28 29 29 29 20 20 20 20 20 | | | | · · · · · · · · · · · · · · · · · · · | | ree nequired |
| Zip Country Zip Country St. Price corporation overs or has paid the current year Intangible Person Property Tax due Line Country St. St. No. | | ie . | | | · · · · · · · · · · · · · · · · · · · | |
| 28 28 29 30 Personal Property Tax due June 20. Yes. Ship. CORPORATE CREATIONS ENTERPRISES INC 4521 PGA-BITO #211 PALM BEACH GDNS F. 33418 82 Speel Address of New Registered Agent | | | | | | · · · · · · · · · · · · · · · · · · · |
| 9. Name and Address of Current Registered Agent CORPORATE CREATIONS ENTERPRISES INC 4521 PGA-BTLV #211 PAHT BEACH GDNS FL 33418 BEACH GDNS FL 33418 28. Steep Address (F) Do Number is Not Acceptables The Pahr Beach GDNS FL 33418 19. Pursuant to the provisions of Sections 807.0502 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 submits this statement for the purpose of changing its registered generic information of the purpose of changing its registered generic information of the purpose of changing its registered generic information in purpose of the provisions of Sections 807.0505 Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered generic information in purpose of changing its registered generic information in purpose of changing its registered generic information in purpose of the provisions of Sections 807.0505 Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered generic information in purpose of changing its | ─ | ├ ─┐ ' | | - | 8. This corporation owes or has paid the | current year Intangible |
| CORPORATE CREATIONS ENTERPRISES INC 4521 PGA-BUTU #211 PAHT BEACH GDNS FL 33418 82 Signet Address (°C) Dox, Number is Not Acceptables 83 Signet Address (°C) Dox, Number is Not Acceptables 84 CWN Anni Beach FL as 27 Code 85 Signet Address (°C) Dox, Number is Not Acceptables 86 CWN Anni Beach FL as 27 Code 87 Signet Address (°C) Dox, Number is Not Acceptables 88 Signet Address (°C) Dox, Number is Not Acceptables 89 Signet Address (°C) Dox, Number is Not Acceptables 80 Signet Address (°C) Dox, Number is Not Acceptables 81 Signet Address (°C) Dox, Number is Not Acceptables 82 Signet Address (°C) Dox, Number is Not Acceptables 83 Signet Address (°C) Dox, Number is Not Acceptables 84 CWN Anni Beach FL as 27 Code 85 Signet Address (°C) Dox, Number is Not Acceptables 86 CWN Anni Beach FL as 27 Code 87 Signet Address (°C) Dox, Number is Not Acceptables 88 Signet Address (°C) Dox, Number is Not Acceptables 89 Signet Address (°C) Dox, Number is Not Acceptables 80 Signet Address (°C) Dox, Number is Not Acceptables 80 Signet Address (°C) Dox, Number is Not Acceptables 81 Signet Address (°C) Dox, Number is Not Acceptables 82 Signet Address (°C) Dox, Number is Not Acceptables 83 Signet Address (°C) Dox, Number is Not Acceptables 84 CWN Anni Beach FL as 3160 12 CWN Anni Beach FL as 27 Code 13 Signet Address (°C) Dox Number is Not Acceptables 14 CWN Anni Beach FL as 27 Code 15 Signet Address (°C) Dox Number is Not Acceptables 16 CWN Anni Beach FL as 27 Code 17 Signet Address (°C) Dox Number is Not Acceptables 18 Signet Address (°C) Dox Number is Not Acceptables 19 Signet Address (°C) Dox Number is Not Acceptables 19 Signet Address (°C) Dox Number is Not Acceptables 19 Signet Address (°C) Dox Number is Not Acceptables 19 Signet Address (°C) Dox Number is Not Acceptables 10 Change Signet Address (°C) Dox Number is Not Acceptables 10 Change Signet Address (°C) Dox Number is Not Acceptables 10 Change Signet Address (°C) Dox Number is Not Acceptables 10 Change Signet Address (°C) Dox Number i | 24 | | | 30 | Personal Property Tax due June 30. | Yes, ZNO |
| 4521 PGA-BLVD #211 PAHM BEACH GDNS FL 33418 82 Steek Address EP, Dook Number is to Na Acceptable) 84 CW Ami Beach FL 8s Zip Code 33160 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 authorizegibly the corporation's bubmits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorizegibly the corporation's bubmits this statement for the purpose of changing its registered signer. I am Familiar with, and accept the displayins of, Section 607,0502 for florida, Statistics. SIGNATURE OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. ADDITIONS(SHANGES TO OFFICERS AND DIRECTORS IN 12 In TIME P S ADDITIONS(SHANGES TO OFFICERS AND DIRECTORS IN 12 In TIME P S ADDITIONS(SHANGES TO OFFICERS AND DIRECTORS IN 12 In TIME P S ADDITIONS(SHANGES TO OFFICERS AND DIRECTORS IN 12 In TIME P S ADDITIONS(SHANGES TO OFFICERS AND DIRECTORS IN 12 In TIME P S ADDITIONS(SHANGES TO OFFICERS AND DIRECTORS IN 12 In TIME P S ADDITIONS(SHANGES TO OFFICERS AND DIRECTORS IN 12 In TIME P S ADDITIONS(SHANGES TO OFFICERS AND DIRECTORS IN 12 In TIME P S ADDITIONS(SHANGES TO OFFICERS AND DIRECTORS IN 12 In TIME P S ADDITIONS SHANGES AND IN | | | | 81 Name - | | ed Agent |
| ### Addition Part Part Part Part Part Part | | | RISES INC | | louglas Kambera | |
| STATE D | | | | 82 Street Ad | dress (P.O. Box Number is Not Acceptable) | |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Ronda Statutes, the above-named corporation submits this statement for the purpose of changing its registered or registered agent, or both, in the State of Florida, Such change was authorized by the corporation board of directors. I hereby accept the appointment as registered agent, and accept the obligations of Section 607.0505, Piorida, Statutes, The above-named corporation board of directors. I hereby accept the appointment as registered agent, and accept the obligations of Section 607.0505, Piorida, Statutes, The above-named corporation board of directors. I hereby accept the appointment as registered agent, and accept the obligations of Section 607.0505, Piorida, Statutes, The above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation of directors. I hereby accept the appointment as registered agent, or both and agent, and accept the obligations of Change agent, and the provision of the purpose of change agent, and the provision of the purpose of change agent, and the purpose of directors. I hereby accept the appointment as registered agent, and the purpose of change agent and then many and the purpose of change agent and then many and the purpose o | | REM BEAUTH GUNS FL 33418 | | | SS Collins Avenue | |
| office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation agent and are appointment as registered agent. The appointment as registered agent. The familiar with and accept the obligations of, Section 607,0505, Floridas Statians. SIGNATURE 12 | | | | | | |
| office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation agent and are appointment as registered agent. The appointment as registered agent. The familiar with and accept the obligations of, Section 607,0505, Floridas Statians. SIGNATURE 12 |] | | | 84 C | 2 - B - C - E | |
| office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation agent and are appointment as registered agent. The appointment as registered agent. The familiar with and accept the obligations of, Section 607,0505, Floridas Statians. SIGNATURE 12 | 11 Burguent | to the provisions of Sections 607.050 | 12 and 607 1508 Florida Statute | s the about named on | moration submits this statement for the number | |
| 12. | office or | registered agent, or both, in the State | of Florida. Such change was at | thorized by the corpor | ation's board of directors. I hereby accept the | appointment as registered |
| 12. | agent. La | | ations of, Section 607,0505, Flori | / // // | 1 1 | lan |
| TITLE D DELETE D | SIGNATURE | Stopature type of registered age | est and tile if applicable (NOT) | | Taucher (I) 2) | 70 |
| NAME | 12. | | | | | ND DIRECTORS IN 12 |
| NAME | TITLE | D | ☐ DELETE | INTITLE PISE | resident Secretary | Change Addition |
| MIAMI BCH FL 33160 | NAME | RODRIGUEZ, MANUEL | | | 1 | |
| DELETE D | STREET ADDRESS | 17555 COLLINS AVE | | 1.3 STREET ADDRESS | | |
| TITLE | CITY-ST-ZIP | MIAMI BCH FL 33160 | | 1.4 CITY-ST-ZIP | | |
| 17555 COLLINS AVE 2.3 STREET ADDRESS 17555 COLLINS AVE 2.4 CITY-ST-ZIP | | D | DELETE | | | 1 4. 11.1 |
| 17555 COLLINS AVE 2.3 STREET ADDRESS 17555 COLLINS AVE 2.4 CITY-ST-ZIP MIAMI BCH FL 33160 2.4 CITY-ST-ZIP | NAME | ALONSO, JUAN | | | | Change Addition |
| DELETE D | STREET ADDRESS | 17777 AALLES ALET | | 2.2 NAME | | 1_1 Change L_1 Addition |
| DELETE D | | 17555 CULLINS AVE | | | | L Change L Addition |
| 17555 COLLINS AVE 3.3 STREET ADDRESS MIAMI BCH FL 33160 3.4 CITY-ST-ZIP | | | | 2.3 STREET ADDRESS | • | Change |
| MIAMI BCH FL 33160 3.4. CITY-ST-ZIP | CITY - ST-ZIP | MIAMI BCH FL 33160 | ☐ DELETE | 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP | | |
| DELETE D | CITY-ST-ZIP | MIAMI BCH FL 33160 | ☐ DELETE | 2.3 STREET ADORESS 2.4 CITY-ST-ZIP 3.1 TITLE | | |
| MILTON, JOSEPH | CITY-ST-ZIP TITLE NAME | MIAMI BCH FL 33160 D GINSBERG, MARK | ☐ DELETE | 2.3 STREET ADORESS 2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME | | |
| NAME MILTON, JOSEPH 4.2 NAME | CITY-ST-ZIP TITLE NAME STREET ADDRESS | MIAMI BCH FL 33160 D GINSBERG, MARK 17555 COLLINS AVE | ☐ DELETE | 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS | | |
| 17555 COLLINS AVE | CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP | MIAMI BCH FL 33160 D GINSBERG, MARK 17555 COLLINS AVE MIAMI BCH FL 33160 | | 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP | Tre 451, rock. | ☐ Change ☐ Addition |
| CITY-ST-ZIP MIAMI BCH FL 33160 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP 5.4 CITY-ST-ZIP Change Addition TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME CNAME Change Addition | CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | MIAMI BCH FL 33160 D GINSBERG, MARK 17555 COLLINS AVE MIAMI BCH FL 33160 D | | 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE | TreAsurer. | ☐ Change ☐ Addition |
| TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME </td <td>CITY - ST- ZIP TITLE NAME STREET ADDRESS CITY - ST- ZIP TITLE NAME</td> <td>MIAMI BCH FL 33160 D GINSBERG, MARK 17555 COLLINS AVE MIAMI BCH FL 33160 D MILTON, JOSEPH</td> <td></td> <td>2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4. 2 NAME</td> <td>Treasurer.</td> <td>☐ Change ☐ Addition</td> | CITY - ST- ZIP TITLE NAME STREET ADDRESS CITY - ST- ZIP TITLE NAME | MIAMI BCH FL 33160 D GINSBERG, MARK 17555 COLLINS AVE MIAMI BCH FL 33160 D MILTON, JOSEPH | | 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4. 2 NAME | Treasurer. | ☐ Change ☐ Addition |
| 5.3 STREET ADDRESS | CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS | MIAMI BCH FL 33160 D GINSBERG, MARK 17555 COLLINS AVE MIAMI BCH FL 33160 D MILTON, JOSEPH 17555 COLLINS AVE | | 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS | TreAsurer. | ☐ Change ☐ Addition |
| 5.3 STREET ADDRESS | CITY-SI-7IP TITLE NAME STREET ADDRESS CITY-SI-7IP TITLE NAME STREET ADDRESS CITY-SI-7IP | MIAMI BCH FL 33160 D GINSBERG, MARK 17555 COLLINS AVE MIAMI BCH FL 33160 D MILTON, JOSEPH 17555 COLLINS AVE | ĎÉLETE | 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP | Treasurer. | Change Addition Change Addition |
| CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME Change Addition | CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE | MIAMI BCH FL 33160 D GINSBERG, MARK 17555 COLLINS AVE MIAMI BCH FL 33160 D MILTON, JOSEPH 17555 COLLINS AVE | ĎÉLETE | 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE | Treasurer. | Change Addition Change Addition |
| TITLE DELETE. 6.1 TITLE Change . Addition NAME 6.2 NAME | CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME | MIAMI BCH FL 33160 D GINSBERG, MARK 17555 COLLINS AVE MIAMI BCH FL 33160 D MILTON, JOSEPH 17555 COLLINS AVE | ĎÉLETE | 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME | Treasurer. | Change Addition Change Addition |
| Ĭ I | CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS | MIAMI BCH FL 33160 D GINSBERG, MARK 17555 COLLINS AVE MIAMI BCH FL 33160 D MILTON, JOSEPH 17555 COLLINS AVE | ĎÉLETE | 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS | Tre4surer. | Change Addition Change Addition |
| | CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP | MIAMI BCH FL 33160 D GINSBERG, MARK 17555 COLLINS AVE MIAMI BCH FL 33160 D MILTON, JOSEPH 17555 COLLINS AVE | DELETE | 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP | Treasurer. | Change Addition Change Addition Change Addition |
| STREET ADDRESS 6.3 STREET ADDRESS | CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE | MIAMI BCH FL 33160 D GINSBERG, MARK 17555 COLLINS AVE MIAMI BCH FL 33160 D MILTON, JOSEPH 17555 COLLINS AVE | DELETE | 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE | Treasurer. | Change Addition Change Addition Change Addition |

14. I hereby certify that the information supplied with this filling 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 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.

6.4 CITY-ST-ZIP

SIGNATURE:

12/98

FILED

Jan 27 1998 8:00am

Secretary of State