## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/08: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000090029 (4)

## FILED Aug 26 1998 8:00am Secretary of State

1. Corporatio	OLOR CREATIVE GROUP, I	NC.		[ [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [	āji <b>ā jājij ād</b> iji <b>da</b> jig bidiā jau 120.
Principal Plac	e of Business	Mailing Address		{ I (889)0001 (10 (9)11 (10)1) 00/1( 80()) 06/1/ 9/	BIND ONEN ONNY ORNA NIOLA COLL 100)
8900 SW 107TH AVENUE #206 8900 SW 107TH AVENUE #206			#206		
MIAMI FL 33176 MIAMI FL 33176					
				DO NOT WRITE IN T	HIS SPACE
				3. Date Incorporated or Qualified 10/20/1997	}
2. Principal P	Place of Business	2a. Mailing Address		4 FEI Number	Applied For
21 741	W. 83rd Street	26 741 W.	83rd Street	65-0792922	Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	[	City & State  28 Haleah	. FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	current year Intangible
24 330	25 USA	29 33014	30 USA	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Current	nt Registered Agent		10. Name and Address of New Register	red Agent
KOBRIN, DAVID A BI Name Joseph W. Pender, Jr.					
8900 SW 107TH AVENUE #206			82 Street Ad	Idress (P.O. Box Number is Not Acceptable)	1
MIAMI FL 33178				19676 NW 86th C	ourt
			83		
			64 City	Miami Lakes . F	L 85 Zip Code 33015
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					
office or registered eigent, 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 familiar with, and accept the obligations of, section 607.0505, Florida Statutes.  SIGNATURE					
OIGHATORE	Signature, typed or printed name of regularied age		OTE: Registered Agent signature		
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	DPS COCOUNT ID	L_] DELETE	1.1 TITLE		Change Addition
NAME	PENDER, JOSEPH W JR		1.2 NAME		8
STREET ADDRESS	19676 NW 86TH COURT MIAMI LAKES FL 33015		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	DV	N	1.4 CITY-ST-ZIP 2.1 TITLE		<del></del>
NAME	WYNTER, TONY A	<b>∑</b> DELETE	2.2 NAME		Change Addition
STREET ADDRESS	2431 SW 84TH TERRACE		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIRAMAR FL 33025		2.4 CITY-ST-ZIP		
TITLE	DT	DELETE	3.1 TITLE		Change Addition
NAME	REGIST, RICKIE D	[] becel	3.2 NAME		surviyor [ reconsti
STREET ADORESS	2755 NW 198TH TERRACE		3.3 STREET ADDRESS		
CITY-ST-ZIP	CAROL CITY FL 33058		3.4 CiTY-ST-ZiP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME		<u></u>	4.2 NAME		_ ,
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		79.74.5.11.11.11.11.11.11.11.11.11.11.11.11.1	4.4 CITY-ST-ZIP		
TITLE		DELETE	5,1 TIYL€		Change Addition
NAME			5.2 NAME		}
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE	· ·	L_J DELETE	6.1 TITLE		Change Addition
NAME	1		6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	25 Ab 41 1-6 -41 -44	Alia Silan da a and a califa for A	6.4 CITY-ST-ZIP	nation 110 07/21/i) Elevido Statutos I further con	UE at at at a la East at a

14. I 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 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.

is alliki i

SIGNATURE: In ANS

7/13/98

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