

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$350 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Sep 01, 1999 8:00 am
Secretary of State

09-01-1999 90009 040 ***150.00

DOCUMENT # P97000095800

1. Corporation Name
CREATIVE ARM, INC.

Principal Place of Business
**596 THIRD STREET NORTH
NAPLES FL 34102**

Mailing Address
**596 THIRD STREET NORTH
NAPLES FL 34102**



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/06/1997

4. FEI Number

59-3478624

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year
Intangible Personal Property. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**PASSIDOMO, KATHLEEN C ESQ
2640 GOLDEN GATE PARKWAY
SUITE 315
NAPLES FL 34105**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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 familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCANLAN, EUGENE	1.2 NAME	
STREET ADDRESS	596 THIRD STREET NORTH	1.3 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL 34102	1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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.

SIGNATURE

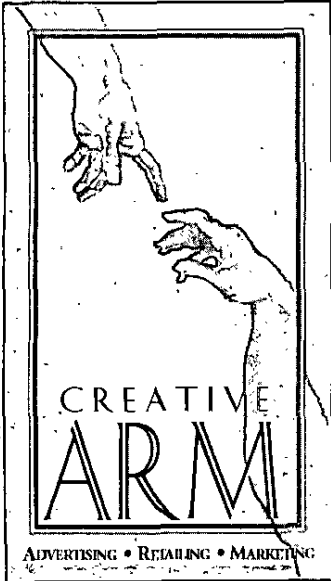
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

August 30, 1999 **649-6680**

Date Daytime Phone #

CR2E034 (5/99)

0099246



Monday, August 30, 1999

Division of Corporations
Annual Report Filings
P.O. Box 1500
Tallahassee FL 32302-1500

Dear Sir or Madam,

Enclosed please find our corporate check in the amount of \$150. for our Profit Corporation Annual Report filing fee. I am enclosing this amount per the instructions of an individual at your office.

Our office did not receive the customary first notice. We have been on hold re this matter waiting for our accountants to return from holiday to determine if for some reason they had received our report. They had not. Neither did our registered agent. If you will check last year's records you will note that we were a quick payment on the first notice and would have been again this year had we received the first notice.

We realize that you have probably heard this story before. In the case of Creative ARM, it is the absolute truth that we did not receive the first notice. We are in only our second year of operation and take these matters seriously and again point to our fast pay last year as an indication of our commitment to follow all procedures as pertaining to our corporate status. Also, please bear in mind it makes absolutely no sense whatsoever for a young firm such as Creative ARM to choose to pay a substantially higher fee when it is not necessary.

Please take our comments seriously. We can only hope that you will believe us and provide us with the benefit of the doubt. We thank you for any and all consideration you may provide to us.

Sincerely,

A handwritten signature in dark ink, appearing to read 'Gene Scanlan', is written over a horizontal line.

Gene Scanlan
President, Creative ARM, Inc.