

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

FILED

Mar 19 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S64447** (3)

1. Corporation Name
CREATIVE INFOTEXT PROGRAMS, INC.



Principal Place of Business:

**9421 SW 6 STREET
PEMBROKE PINES FL 33025
US**

Mailing Address:

**9421 SW 6 STREET
PEMBROKE PINES FL 33025-1155
US**

2. Principal Place of Business:

2a. Mailing Address:

21. Suite, Apt. #, etc.

26. Suite, Apt. #, etc.

22. City & State

27. City & State

23. Zip

Country

28. Zip

Country

24. Zip

25. Country

29. Zip

30. Country

9. Name and Address of Current Registered Agent

**CAROLE FIOCCO
9421 SW 6 STREET
PEMBROKE PINES FL 33025**

3. Date Incorporated or Qualified
07/01/1991

3a. Date of Last Report
02/27/1996

4. FEI Number
65-0272598

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81. Name

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

83.

84. City

FL

85. 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 and I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature of person in charge of filing (agent and/or incorporator)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

1. TITLE
P
2. NAME
FIOCCO, PETER
3. STREET ADDRESS
9421 SW 6 STREET
4. CITY - ST - ZIP
PEMBROKE PINES FL ST

☐ DELETE

5. TITLE
FIOCCO, CAROLE
6. STREET ADDRESS
9421 SW 6 STREET
7. CITY - ST - ZIP
PEMBROKE PINES FL

☐ DELETE

8. TITLE
FIOCCO, CAROLE
9. STREET ADDRESS
9421 SW 6 STREET
10. CITY - ST - ZIP
PEMBROKE PINES FL

☐ DELETE

11. TITLE
FIOCCO, CAROLE
12. STREET ADDRESS
9421 SW 6 STREET
13. CITY - ST - ZIP
PEMBROKE PINES FL

☐ DELETE

14. TITLE
FIOCCO, CAROLE
15. STREET ADDRESS
9421 SW 6 STREET
16. CITY - ST - ZIP
PEMBROKE PINES FL

☐ DELETE

17. TITLE
FIOCCO, CAROLE
18. STREET ADDRESS
9421 SW 6 STREET
19. CITY - ST - ZIP
PEMBROKE PINES FL

☐ DELETE

20. TITLE
FIOCCO, CAROLE
21. STREET ADDRESS
9421 SW 6 STREET
22. CITY - ST - ZIP
PEMBROKE PINES FL

☐ DELETE

23. TITLE
FIOCCO, CAROLE
24. STREET ADDRESS
9421 SW 6 STREET
25. CITY - ST - ZIP
PEMBROKE PINES FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

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

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PETER FIOCCO

3/10/97

954 433 5415

CR2E034 (9/96)