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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

CREATIVE MAGE ENTERPRISES, INC.  Prints of Para of Business  Self I Mr 8200 ArENUE MAIN FL 33168  Self I Mr 8200 Arenue  Self I	DOCUMENT # S97325 (2)									
Self NW RAND AVENUE   MANIFE 20166   3. Date Proceposited or Qualified   3a. Date of Lest Report   12/02/1991   12/02/19	•		ES, INC.				 			
MAMI FL 30168	Principal Place of Business		Mailing Address			- I IOOIIEIA HAR IDIN 1000A FAITE		TII BLOK BIBH BIBL	1 \$100 BIOK 1001	
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Clay & State	1		<b>├</b> ,							
28										
Addition  Fig. 1  Country  25  28  29  30  This corporation has liability for intengible tax under is 199.0022 Provide Statutus  10  10  Name and Address of Current Registered Agent  11  Name and Address of New Registered Agent  12  Street Address of New Registered Agent  13  Name  MONTELLS, LIONEL  82  Street Address (P.O. Box Number is Not Acceptable)  83  Street Address (P.O. Box Number is Not Acceptable)  84  City  Fig. 85  Zip Code  11  Fire and accept the depole for a fire from the Such change was authorized by the corporation's submits the statement for the purpose of changing his registered different	23		F-1 .				, , ,			
25	Zip			Cour	Country			or Intanoit		****
11. Fursion to the provisions of Sections 607 0002 and 607 1509, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered difference or registered depend, or both, in the State of Forida. Such change was authorized by the corporation's board of directors. I hereby accept the epipelment as registered difference or registered agent, or both, in the State of Forida. Such change was authorized by the corporation's board of directors. I hereby accept the epipelment as registered difference or registered agent. I am state of Forida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered difference or registered agent. I am state of Forida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered difference or registered agent. I am state of Forida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am state of Forida. Such change was authorized by the corporation in panel directors. I hereby accept the appointment as registered agent. I am state of Forida. Such change agent agent in panel directors. I hereby accept the appointment as registered agent. I am state of Forida. Such change agent agent in panel directors. I hereby accept the appointment as registered agent. I am state of Forida. Such change agent agent in panel directors. I hereby accept the appointment as registered agent. I am state of Forida. Such change agent agent agent in panel directors. I hereby accept the appointment as registered agent. I am state of Forida. Such change agent agent agent in panel directors. I hereby accept the appointment as registered agent. I am state of Forida. Such agent ag	24			30						
MONTELLS, LIONEL 6961 NW 82 AVE. MIAMI FL 33166  B3  B4 City  FL 65 Zip Code  11. Fursiant to the provisions of Sections 607 0502 and 607 1508, Florids Statutes, the above remed corporation submits this statement for the purpose of changing its registered office or registered legent, or both, in the State of Florids, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I we may be a submit to the provisions of Sections 607 0509. She florids Statutes, the above remed corporation's board of directors. I hereby accept the appointment as registered agent. I we may be a submit to the purpose of changing its registered agent. I we may be a submit to the purpose of changing its registered agent. I we may be a submit to the purpose of changing its registered agent. I we may be a submit to the purpose of changing its registered agent. I we may be a submit to the purpose of changing its registered agent. I we may be a submit to the purpose of changing its registered agent. I we may be a submit to the purpose of changing its registered agent. I we may be a submit to the purpose of changing its registered agent. I we may be a submit to the purpose of changing its registered agent. I we may be a submit to the purpose of changing its registered agent. I we may be a submit to the purpose of changing its registered agent. I we may be a submit to the purpose of changing its registered agent. I we may be a submit to the purpose of changing its registered agent. I we may be a submit to the purpose of changing its registered agent. I we may be a submit to the purpose of changing its registered agent. I we may be a submit to the purpose of changing its registered agent. I we may be a submit to the purpose of changing its registered agent. I we may be a submit to the purpose of changing its registered agent. I we may be a submit to the purpose of changing its registered agent. I we may be a submit to the purpose of changing its registered agent. I we may be a submit		9. Name and Address of Cui	rent Registered Agent				10. Name and Address of New	Registe	red Agent	
BSST NW 82 AVE. MIAMI FL 33168  B4 City  FL 85 Zep Codo  The purpose of Changing its registered office consisting to the purpose of Change in the Change in the Change in Addition  SIGNALUET  SIGNALUET  SIGNALUET  SIGNALUET  DELETE 1.1 TITLE  PD ONTELLS, LIONEL  SIGNALUET  SI	MANTE	II O HONE!		ł	81 Name	3				
MIAMI FL 33166					82 Street	t Addre	ss (P.O. Box Number is Not Accept	able)		
11. Fursuant to the provisions of Sections 607.0502 and 607.1509, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its rejectored office corresponding of the purpose of changing its rejectored office corresponding of the purpose of changing its rejectored office corresponding of the purpose of changing its rejectored office corresponding of the purpose of changing its rejectored office corresponding of the purpose of changing its rejectored office corresponding of the purpose of changing its rejectored office corresponding of the purpose of changing its rejectored office corresponding of the purpose of changing its rejectored office corresponding its rejectored office corresponding its rejectored office corresponding its rejectored office of the purpose of changing its rejectored office of the purpose of change in the purpose of changing its rejectored office of the purpose of					B3					
11. Fursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits the statement for the purpose of changing its registered diffice familiar with, and access the obligators of Section 607.0505, Florida Statutes.  SIGNATURE  Special functor provisions of Sections 607.0506, Florida Statutes, the above named corporation's board of directors. I hereby accept the appointment as registered diffice familiar with, and access the obligators of Section 607.0506, Florida Statutes.  SIGNATURE  Special functor provisions of tappined april and this records:  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. PD	1711/4411 1	2 00 100								
11. Pressent to the provisions of Sections 607 0502 and 607 1500, Florida Statutes, tho above named corporation submits this statement for the purpose of changing its registered office or registered eigent, or both, in the State of Floridas. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am facility in the State of Floridas Statutes.  SIGNATURE  12. OF CERRS AND DIFFE CORS. 13. ADDITIONS/CHANGES TO OFFICERS AND DIFFE CORS. 14. ADDITIONS/CHANGES TO OFFICERS AND DIFFE CORS. 15. ADDITIONS/CHANGES TO OFFICERS AND DIFFE CORS. 16. ADDITIONS/CHANGES TO OFFICERS AND DIFFE CORS. 17. ADDITIONS/CHANGES TO OFFICERS AND DIFFE CORS. 18. ADDITIONS/CHANGES TO OFFICERS AND DIFFE CORS. 19. NAME  19. MAMI FL. 13. SIREE ADDRESS  14. CORS. ST. 2P  10. DEFFIE 2. TITLE 2. TITLE 2. TITLE 2. TITLE 3. TITLE 4. DEFFIE 2. TITLE 4. TITLE 4. TITLE 4. TITLE 5. TITLE 5. TITLE 6. CHANGES 6. STREET ADDRESS 6. ST				l	1 '					
Note   Post	11. Pursuant to or registere familiar wit	o the provisions of Sections 607.0: ed agent, or botn, in the State of F th, and accept the obligations of, S	502 and 607.1508, Florida Statute lorida. Such change was authoriz ection 607.0505, Florida Statutes	es, the aboved by the c	e-named c propration's	corpora s board	tion submits this statement for the p of directors. I hereby accept the ap	opointmer	f changing its re nt as registered	egistered office l agent. I am
13.   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		Sacrada to Tempod on military pages, of security and	and Franch the displayed by	F						
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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 earth, that I am an officer or director of the experiation 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 charged, or on an akachment with an address.

SIGNATURE:

POLICE MONTELLS 1/31/96 505) 417-5138