SECOND Amount due	NOTICE: CORPORATION V	WILL BE DISSOLVED ON OR AFTI (IF DISSOLVED, MINIMUM AMOUNT	ER AUGUST 7, 1996.		
COR ANNU	PROFIT PORATION JAL REPORT	FLORIDA DEF Sandr Secre	ARTMENT OF STATE a B Mortham stary of State		
1996 DIVISION OF CORPORATIONS DOCUMENT # V15413 (0)					
1. Corporation	Name NX CREATIVE GROUP	(0)			
				1004 8/04 1004 000 8/04 1/04	
Principal Place of Business Mailing Address 6790 SW 74TH ST 6790 SW 74TH ST				1 18411 #11881 11881 B1(11 B1981 11988	itst Biolit Globi gibli Qibli Qibli Dibli (60)
SOUTH MIAM	H FL 33143	SOUTH MIAMI FL 331	43	3. Date Incorporated or Qualified	De Dale of Leat December 1
2. Principal Pl	ace of Business	2a, Mailing Address		02/20/1992 4. FEI Number	3a. Date of Last Report 05/01/1995
Suite, Apt	¥. etc	26 Suite, Apt #, etc		65-0308805	Applied For Not Applicable
City & State		27 City & State		5. Certificate of Status Desired	\$8.75 Additional Fee Flequired
23 Zip	· • · · · · · · · · · · · · · · · · · ·	28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24	Country 25	7 ₁ p 29	Country 30	8. This corporation has liability for Florida Statutes	ntargible tax under s. 199,032, Yes No
VIA	9. Name and Address of	Current Registered Agent	81 Name	10. Name and Address of New Re	gistered Agent
6790 SW 74TH ST SOUTH MIAMI FL 33143			82 Street Add	iress (P.O. Box Number is Not Acceptab	e)
30	OTH MIAMI PL 33143		83		
			84 City		85 Zip Code
11. Pursuant to office or re agent. Lan	o the provisions of Sections 6 gistered agent, or both, in the n familiar with, and accept the	07 0502 and 607 1508, Florida Statu e State of Florida Such change was e obligations of, Section 607 0505, F	ites, the above named corp authorized by the corporati	ioration submits this statement for the pu on's board of directors. I hereby accept	
SIGNATURE	Signature ityped or printed name of regis	3.1.1.1.1.1.0.000,1	nonesi biaigies		
12.		RS AND DIRECTORS	HE hisp stered Agent signature requi	red when rome taking: ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12
TITLE NAME	VIAU, J. PAUL	DELETE	1.1 TITLE 1.2 NAME	···	ERS AND DIRECTORS IN 12 Change Addition 8(8), 750
STREET ADDRESS CITY-ST-ZIP	6790 SW 74 ST. South Miami Fl		1 3 STREET ADORESS		E037
TITLE	OOOTH WAAMI FL	DELETE	1.4 CHY - ST - ZIP 2.1 TITLE		Change Addation
NAME		<u> </u>	2 2 NAME		
STREET ADDRESS CITY-ST-ZIP			2 3 STREET ADDRESS		
TITLE		DELETE	2 4 CITY - ST-ZIP 3 1 TITLE		Change Add tion
NAME STREET ADDRESS			3 2 NAME		
CITY-ST-ZIP			3.3 STREET ADDRESS 3.4 CHY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME STREET ADDRESS			4 2 NAME 4 3 STREET ADDRESS		
CITY-ST-ZIP			44 CiTY - ST - 7IP		
TITLE NAME		DELETE	5 1 TITLE		Change Addition
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - ST - ZIP			5 4 CITY - ST - ZIP		
TITLE NAME		DELETE	6 1 TITLE		Change Addition
STREET ADDRESS			6.2 NAME 6.3 STREET ADDRESS		
CITY-ST-ZIP			6 4 CITY - ST - ZIP		
further certi made unde		ted grafts should report or supplient three of the proportion or the real ook 1 in the task or on an attachme	eiver or trustee empowered nit with an address	fy for the exemption stated in Section 11 nd accurate and that my signature shall to execute this report as required by Cr	
	SIGNATURE AND TY	PED OF PARTED NAME OF SIGNING OFFICER	OR DIRECTOR		Digital of fraction