



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK
* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 135080		2. Name of Corporation Creative Circle Media Consulting, Inc.			
3. Street Address Principal Business Office 169 Weybosset Street, Ste. 217			City Providence	State RI	Zip 02903
4. Business Phone No. 401-277-4818		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Provide consulting services to publications.					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name William J. Ostendorf			Vice President Name William J. Ostendorf		
Street Address 169 Weybosset Street, Ste. 217			Street Address 169 Weybosset Street, Ste. 217		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
Secretary Name William J. Ostendorf			Treasurer Name William J. Ostendorf		
Street Address 169 Weybosset Street, Ste. 217			Street Address 169 Weybosset Street, Ste. 217		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name William J. Ostendorf			Director Name		
Street Address 169 Weybosset Street, Ste. 217			Street Address		
City Providence	State RI	Zip 02903	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES - THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000,000	Common	\$0.0001	600,000	Common	\$0.0001

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

FILED

File Date MAR 31 2008

Check No. DS 14530

By: _____

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Tobias Lederberg 3-27-08
Signature Date

Tobias Lederberg
Print or Type Name

Authorized Representative
Title