

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000021993

Entity Name: CREATIONS BIANCA INC.

FILED  
Feb 01, 2006  
Secretary of State

**Current Principal Place of Business:**

5610 SW 58TH COURT  
DAVIE, FL 33314 US

**New Principal Place of Business:**

**Current Mailing Address:**

5610 SW 58TH COURT  
DAVIE, FL 33314 US

**New Mailing Address:**

FEI Number: 65-0587701      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

QUINTERO, HUMBERTO SR  
5610 SW 58TH COURT  
DAVIE, FL 33314 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: QUINTERO, HUMBERTO SR  
Address: 5610 SW 58 TH COURT  
City-St-Zip: DAVIE, FL 33314

Title: VP ( ) Delete  
Name: QUINTERO, BLANCA  
Address: 5610 SW 58 TH COURT  
City-St-Zip: DAVIE, FL 33314

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HUMBERTO QUINTERO

P

02/01/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date