

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000084894

FILED  
Jan 05, 2007  
Secretary of State

Entity Name: CREATIVE HOME IMPROVEMENTS AND REMODELING, INC.

**Current Principal Place of Business:**

1815 NW 67TH AVE  
MARGATE, FL 33063

**New Principal Place of Business:**

**Current Mailing Address:**

1815 NW 67TH AVE  
MARGATE, FL 33063

**New Mailing Address:**

FEI Number: 83-0432197      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

FRANKEL, JEROME  
1815 NW 67TH AVE  
MARGATE, FL 33063      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: PSTD ( ) Delete  
Name: FRANKEL, JEROME  
Address: 1815 NW 67TH AVE  
City-St-Zip: MARGATE, FL 33063

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

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

Title: VP ( ) Change (X) Addition  
Name: LAWSON, WALLACE  
Address: 1815 NW 67TH AVE  
City-St-Zip: MARGATE, FL 33063

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: JEROME FRANKEL

PSTD

01/05/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date