

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000089996

FILED
Mar 23, 2009
Secretary of State

Entity Name: CREATIVE MINDWORKS, CORP.

Current Principal Place of Business:

11900 BISCAYNE BLVD
SUITE 630
MIAMI, FL 33181

New Principal Place of Business:

Current Mailing Address:

11900 BISCAYNE BLVD
SUITE 630
MIAMI, FL 33181

New Mailing Address:

FEI Number: 65-0870255 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZARETSKY, LOUIS ESQ
RITTER, RITTER AND ZARETSKY, P.A.
555 N.E. 15TH STREET, SUITE 101
MIAMI, FL 33130 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: PSD () Delete
Name: FERNANDEZ, LIZETTE
Address: 14160 NW 77 COURT, #11
City-St-Zip: MIAMI LAKES, FL 33016

Title: VD () Delete
Name: FERNANDEZ, ALEJANDRO
Address: 14160 NW 77 COURT, #35
City-St-Zip: MIAMI LAKES, FL 33016

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: FERNANDEZ, LIZETTE
Address: 11900 BISCAYNE BLVD, #630
City-St-Zip: MIAMI, FL 33181

Title: VD (X) Change () Addition
Name: FERNANDEZ, ALEJANDRO
Address: 11900 BISCAYNE BLVD, #630
City-St-Zip: MIAMI, FL 33181

Title: D () Change (X) Addition
Name: GALLEGOS, FELIPE
Address: 11900 BISCAYNE BLVD, #630
City-St-Zip: MIAMI, FL 33181

I hereby certify that the information supplied with this filing does not qualify 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: ALEJANDRO FERNANDEZ

VP

03/23/2009

Electronic Signature of Signing Officer or Director

_____ Date