2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

V16660 **DOCUMENT #**

STREET ADDRESS

CITY-ST-ZIP

CREATIVE WOODWORKS UNLIMITED, INC.				04-28-2003 9051 / 041 ****150.00		
Principal Place of Business 4657 S. U.S. 1 STE. A ROCKLEDGE FL 32955 US		Mailing Address 498 SHERWOOD ST SATELLITE BEACH FL 32937		11017845		
2. Principal Place of Business		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES		
City & State		City & State		4. FE! Number 59-3109820 Applied Not App		
Zip	Country	Zip	Country	5. Certificate of Status Desired \$8.75 Additional Fee Required	al	
	6. Name and Address of Current	Registered Agent	·	7. Name and Address of New Registered Agent		
	en e	AAA ABAA SELI	ـ .Name	اليا المحصوري والامامة في المحورة الاستان المراورة المعصورين الاستان	,	
BRADLEY, VIVIAN 498 SHERWOOD ST			Street Addre	Street Address (P.O. Box Number is Not Acceptable)		
SATELLITE BEACH FL 32937						
V			City	City FL Zip Code		
	named entity submits this statement for ions of registered agent.	the purpose of changing its re	egistered office or reg	egistered agent, or both, in the State of Florida. I am familiar with, and a	sccept	
SIGNATURE .	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE:	Registered Agent signature re	required when reinstating) DATE	_	
Afte	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 c Payable to Florida Department of			9. Election Campaign Financing \$5.00 Ma Trust Fund Contribution. Added to Fa		
10.	OFFICERS AND I	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	1	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D Bradley, Vivian 498 Sherwood Ave Satellite Beach FL 32937	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/D BRADLEY, STEVEN 498 SHERWOOD AVE SATELLITE BEACH FL 32937	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D HENRY, MICHAEL 498 SHERWOOD AVE SATELLITE BEACH FL 32937	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐	Addition 	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/D Lyons-Henry, Angela 498 Sherwood Ave Satellite Beach FL 32937	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change .	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ .	Addition	
TITLE		☐ Delete	TITLE	☐ Change ☐	Addition	

FILED Apr 28, 2003 8:00 am } Secretary of State

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attacherent with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS