

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000064633

Entity Name: CORPORATE CREATIONS NETWORK INC.**Current Principal Place of Business:**801 US HIGHWAY 1
NORTH PALM BEACH, FL 33408**Current Mailing Address:**801 US HIGHWAY 1
NORTH PALM BEACH, FL 33408 US**FEI Number:** 65-0626860**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**UNITED AGENT GROUP INC.
801 US HWY 1
N PALM BEACH, FL 33408 US*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

Officer/Director Detail :

Title PRESIDENT
Name BAVARO, TRENTON
Address 801 US HIGHWAY 1
City-State-Zip: NORTH PALM BEACH FL 33408

Title TREASURER
Name CHASSE, JEFFREY
Address 150 ROYALL STREET
City-State-Zip: CANTON MA 02021

Title ASSISTANT TREASURER
Name CLEMONS, GREGORY
Address 150 ROYALL STREET
City-State-Zip: CANTON MA 02021

Title DIRECTOR
Name MOORE, ANDREW
Address 480 WASHINGTON BLVD. 26TH
 FLOOR
City-State-Zip: JERSEY CITY NJ 07310

Title SECRETARY
Name EICHELSDOERFER, SARAH
Address 801 US HIGHWAY 1
City-State-Zip: NORTH PALM BEACH FL 33408

Title ASSISTANT TREASURER
Name SPATARO, THOMAS
Address 150 ROYALL STREET
City-State-Zip: CANTON MA 02021

Title ASSISTANT TREASURER
Name MOCOINI, SHAWNA
Address 150 ROYALL STREET
City-State-Zip: CANTON MA 02021

Title DIRECTOR
Name COX, MATTHEW
Address 100 UNIVERSITY AVENUE, 8TH
 FLOOR
City-State-Zip: TORONTO ON M5J 2Y1

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I hereby 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 all other like empowered.

SIGNATURE: SARAH EICHELSDOERFER**SECRETARY, BY JULIE 04/25/2023**
PHILLIPS, ATTORNEY-IN-
FACT

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title ASSISTANT TREASURER
Name GRUBER, CATHERINE
Address 150 ROYALL STREET
City-State-Zip: CANTON MA 02021

Title ASSISTANT TREASURER
Name DAVIS, PATRICK
Address 150 ROYALL STREET
City-State-Zip: CANTON MA 02021