

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000002151

FILED
Apr 29, 2009
Secretary of State

Entity Name: CREATIVE BUSINESS DEVELOPMENT OF NEVADA, INC.

Current Principal Place of Business:

2500 NORTH MILITARY TRAIL STE 283
BOCA RATON, FL 33431

New Principal Place of Business:

7425 ANDORRA PL.
BOCA RATON, FL 33433

Current Mailing Address:

2500 NORTH MILITARY TRAIL STE 283
BOCA RATON, FL 33431

New Mailing Address:

7425 ANDORRA PL.
BOCA RATON, FL 33433

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PUTTERMAN, MARC
2500 NORTH MILITARY TRAIL STE 283
BOCA RATON, FL 33431 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: CP () Delete
Name: PUTTERMAN, MARC
Address: 2500 NORTH MILITARY TRAIL STE 283
City-St-Zip: BOCA RATON, FL 33431

Title: DVS () Delete
Name: PUTTERMAN, JACQUELINE
Address: 2500 NORTH MILITARY TRAIL STE 283
City-St-Zip: BOCA RATON, FL 33431

Title: DT () Delete
Name: SCHIEMANN, FRED
Address: 2500 NORTH MILITARY TRAIL STE 283
City-St-Zip: BOCA RATON, FL 33431

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: DOUGLAS A COHEN

MR

04/29/2009

Electronic Signature of Signing Officer or Director

Date