

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 27, 2005 8:00 am
Secretary of State

04-27-2005 90325 025 ***150.00

DOCUMENT # F43690

1. Entity Name

CREATIV-LEE DESIGNED INTERIORS, INC.



Principal Place of Business

2701 PINEHURST
FORT LAUDERDALE FL 33332
US

Mailing Address

2701 PINEHURST
FORT LAUDERDALE FL 33332
US

2. Principal Place of Business

1301 ST. TROPEZ CIR

Suite, Apt. #, etc.

2113

City & State

WESTON, FL

Zip
33326

Country

USA

3. Mailing Address

1301 ST. TROPEZ CIR

Suite, Apt. #, etc.

2113

City & State

WESTON, FL

Zip
33326

Country

USA



1st MOORE

CR2E034 (10/04)

4. FEI Number

59-2125853

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BERMAN, F. LEE
2701 PINE HURST.
WESTON FL 33332

7. Name and Address of New Registered Agent

Name

BERMAN, F. LEE

Street Address (P.O. Box Number is Not Acceptable)

1301 ST. TROPEZ CIR.

#2113

City

WESTON

FL

Zip Code

33326

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD B	<input type="checkbox"/> Delete
NAME	BERMAN, F. LEE	
STREET ADDRESS	2701 PINEHURST	
CITY-ST-ZIP	FT LAUDERDALE FL	

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
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TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	1301 ST. TROPEZ CIR. #2113	
CITY-ST-ZIP	WESTON, FL 33326	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 attachment with an address, with all other like empowered.

SIGNATURE:

F. Lee Berman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/6/05 (954) 389-9704

Date

Daytime Phone #