FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY 17 PM 8:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **G25302** **(2)**

1. Corporate Name

CREATIVE ORNAMENTAL DESIGN, INC.

Principal Place of Business	Mailing Address
3120 S.E. DOMINICIA TERR. STUART FL 34997 US	3120 S.E. DOMINICIA TERR. STUART FL 34997 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
02/23/1983	07/06/1994

2. Principle Place of Business	2a. Mailing Address
21	26
Suite Apt # etc 22	Suite Apt # etc 27
City & State 23	City & State 28
Zip 24 / County 25	Zip 29 / County 30

4. FEI Number: **59-2259854** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has nativity for energible tax under § 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
SALVANTE, RICHARD E., JR. **1540 S.W. SUNSET TRAIL** **PALM CITY FL 33490**	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	51 TITLE	☐ Change ☐ Addition
NAME	SALVANTE, RICHARD E., JR	52 NAME	
STREET ADDRESS	1540 S.W. SUNSET TRAIL	53 STREET ADDRESS	
CITY ST ZIP	PALM CITY FL	54 CITY ST ZIP	
TITLE	S	61 TITLE	☐ Change ☐ Addition
NAME	~~SALVANTE, CECELIA~~	62 NAME	
STREET ADDRESS	~~1540 S.W. SUNSET TRAIL~~	63 STREET ADDRESS	
CITY ST ZIP	~~PALM CITY FL~~	64 CITY ST ZIP	
TITLE	V	71 TITLE	☐ Change ☐ Addition
NAME	SALUANTE, CHARLES J.	72 NAME	
STREET ADDRESS	1540 S.W. SUNSET TRAIL	73 STREET ADDRESS	
CITY ST ZIP	PALM CITY FL	74 CITY ST ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

14. I/We hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 1, 7 or Block 13 if changed or added by this report.

SIGNATURE: [signature] Pres. 3-20-95

SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date

Richard E. Salvante Jr.

0381762 CP