## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

1. Corporation Name

K71297

(1)

CREATIVE STORE DESIGNS, INC.													
Principal Place	of Business	Ma	ailing Address					1 00010111 DES 10300 TAQAO 31010 11		## 01014 BIB41 BIB	1 41411 11111 1441	İ	
34-EARL-J. VARNEY PO BOX 3055 BELLEVIEW FL 34421-3055			94-EARL J. VARINEY PO 80X 3055 BELLEVIEW FL 34421-3055				3. Date incorporated or Qualified 03/08/1989	3a. D	ate of Last Re 05/31/19		_		
2. Principal Pia	on of Business	20	Mailing Address					4. FEI Number	_L		oplied For		
			SAME					65-0099972			lot Applicable	<del>, -</del>	
21 NAYDENE VARNEY Suite, Apt. #, etc.			Suite, Apt. #, etc.					\$8.75 Additional					
22								5. Certificate of Status Desired		Fee F	lequired		
City & State			City & State					<ol><li>Election Campaign Financing Trust Fund Contribution</li></ol>			) May Be ∣to Fees		
Zip	Country	28	Zip					8. This corporation has liability for			199.032,		
24	25		30		<u> </u>			Florida Statutes Yes No				_	
	g. Name and Address of Current	Regis	tered Agent			r	•	10. Name and Address of New F	egister	ed Agent			
					81	Name							
VARNEY, NAYDENE 8394 S. E. 110TH STATE ROAD PO BOX 3055					82	Street A	Addres	<sub>s</sub> (P.O. Box Number is Not Acceptat	ile)				
					83							-	
	VIEW FL 34420				84	City				. 85 Zip	Code	$\dashv$	
11 Purcuant to	the provisions of Sections 607.0502	and 60	17 1508 Florida Statute	s the ahr	nve-r	named co	rnorati	on submits this statement for the nu	nose of	changing its re	edistered office	 e_	
or registere	ed agent, or both, in the State of Florid	la. Suct	h change was authorize	d by the	corp	oration's	board	of directors. I hereby accept the app	ointment	as registered	agent. I am	Ĭ	
familiar witi	h, and accept the obligations of, Section	on 607.	.0505, Florida Statutes.						_	- C./			
SIGNATURE _	Signature, typed of printed name of registered agent in	NY.	eus	F : Descriptoros	d Anne	d signature re	andred w	tien reinstating)	S -	5.86			
12.	OFFICERS AND	*****		13.	riges	K Sig at ord re	24	ADDITIONS/CHANGES TO OFF	ICERS A	ND DIRECTO		[원	
TITLE	Р		DELETE	1 1 111						☐ Change	Addition	R2E034 (12/95)	
NAME	VARNEY, NAYDENE			1.2 NAME									
STREET ADDRESS	8394 SW 110TH ST. RD.				1.3 STREET ADDRESS 1.4 CITY-ST-ZIP								
CITY-ST-ZIP	BELLEVIEW FL											띯	
TITLE	VST				2 170116					Change	Addition	「디	
NAME	VARNEY, WILLIAM G.			2.2 N	2.2 NAME							İ	
STREET ADDRESS	8394 SOUTHEAST 110 ST	RD	)		2.3 STREET ADDRESS								
CITY-ST-ZIP BELLEVIEW FL.						2.4 CITY - ST - ZIP							
TITLE	O L WOLL Y PROTECT OF THE PROTECT OF		DELETE		TITLE			Р.		Change	Addition		
NAME				3.2 N	IAME								
STREET ADDRESS				3.3.	STREE	r address							
CITY-ST-ZIP						S1 - ZIP							
TITLE			DELE1E		HILE					Change	Addition		
NAME				421	IAME								
STREET ADDRESS				4.3 9	TREET	ADDRESS							
CITY-ST-ZIP						ST - ZIP						ļ	
TITLE	DELETE			5. 1 TITLE					☐ Change	Addition	7		
NAME			5.2 N	5.2 NAME									
STREET ADDRESS				- 1		ADDRESS							
CITY-ST-ZIP						S1- ZIP							
TITLE	<del></del>		DELETE		CILLLAS TITLE					Change	☐ Addition	$\dashv$	
NAME			<del></del>		AME								
STREET ADDRESS						I ADDRESS							
CITY-ST-ZIP						ST-ZIP							
	L y certify that the Information supplied v	with this	s filing is voluntarily furni				L alify for	the exemption stated in Section 119	.07(3)(k),	Florida Statut	es. I further	-1	

ruo inercoy certify that the information supplied with this string is voluntarity furnished and does not quality for the exemption stated in Section 119.07(3)(k), 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 early 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

OFFICER OR DIRECTOR

5-5-96 (352) 245-3300