FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # K73543

CREATIVE IMAGES OF BREVARD, INC.

Principal Place of Business

Mailing Address

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90153 008 ***150.00



4340-A FORTUNE PLACE W MELBOURNE FL 32904		4340-A FORTUNE PLACE W MELBOURNE FL 32904			DO NOT WRITE IN THIS SPACE
us us					3. Date Incorporated or Qualifed
					03/17/1989
2 Principal Pt	ace of Rusiness	2a. Mailing Address			4. FEI Number Applied For
2. Principal Place of Business 21 4340 - A Fortune Place 26 4340-A Forture				nefl	. 59-2938197 Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.			.,,	5. Certificate of Status Desired Service Servi	
22				6. Election Campaign Financing S5.00 May Be	
23 W. Melbourne 28 W. Melbourn			Coul		Trust Fund Contribution Added to Fees
Zip 24 FL	Country	Zip CC		, ,2904	8. This corporation owes the current year Intangible Personal Property Tax.
24 FL	25 32904	Pagistared Agent	30 ~	, = 107	10. Name and Address of New Registered Agent
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent / 81 Name					
HARRISON, KRISTINA R.					
2003 ROC ROSA DRIVE N.E.				82 Street	Address (P.O. Box Number is Not Acceptable)
PALM BAY FL 32905			-	83	
7,121				"	
				84 City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered					
11. Pursuant to the provisions of Sections 607.1506, Florida Statutes, the above-harmed corporation submits this state of the provisions of Section 607.0506, Florida Statutes. 11. Pursuant to the provisions of Section 607.1506, Florida Statutes and Section 607.0506, Florida Statutes.					
signature Signature Transition of Section 607.0505, Florida Statutes.					
SIGNATURE	Signature typed or printed name of registered agent	and title if applicable. (NOTE	: Registered	Agent signature r	equired when reinstating) OATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ Change ☐ Addition
TITLE	D	☐ DELETE	1.1 TH		Change Addition
NAME	HARRISON, KRISTINA, R		1.2 NA	ME	2700 DILK 28119 CIT
STREET ADDRESS	2003 ROC ROSA DR NE		1.3 ST	REET ADDRESS	3200 Bird Song Ct. Melbourne FL 32934
CITY-ST-ZIP	-PALM BAY FL		_	Y-ST-ZIP	
TITLE	D .	☐ DELETE	2.1 TIT		, , , , , , , , , , , , , , , , , , ,
NAME -	-HARRISON, TERRY L.	e may empere e e		WE	-3200 Bird Song Ct
STREET ADDRESS	20 03 ROC ROSA DR- NE		2.3 ST	REET ADDRESS	Melbourne FC 32934
CITY-ST-ZIP	PAL M BAY FL —			Y-ST-ZIP	Change Addition
TITLE		☐ DELETE	3.1 TIT		Change [] Addition
NAME			3.2 NA		
STREET ADDRESS			3.3 ST	REET ADDRESS	
CITY-ST-ZIP		——————————————————————————————————————	_	Y-ST-ZIP	☐ Change ☐ Addition
TTLE		☐ DELÉTÉ	4.1 TIT		☐ Change ☐ Addition
NAME			4. 2 N		
STREET ADDRESS				REET ADDRESS	
CITY-ST-ZIP	,		_	Y-ST-ZIP	☐ Change ☐ Addition
TITLE		☐ DELETE	5.1 TIT		☐ Change ☐ Addition
NAME	,		5.2 NA		
STREET ADDRESS			4	REET ADDRESS	
CITY-ST-ZIP	***			Y-ST-ZIP	☐ Change ☐ Addition
TITLE		☐ DELETE	6.1 111		☐ Change ☐ Addition
NAME			6.2 NA		
STREET ADDRESS			- 1	REET ADDRESS	
CITY-ST-ZIP			6.4 CIT	Y-ST-ZIP	

14. 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 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: