2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DOCUMENT # L00000011318

CREATIVE INNOVATIONS GROUP LLC

FILED Apr 16, 2007 08:00 AM Secretary of State

Principal Place of Business

11 NORTHEAST 15TH AVE. POMPANO BEACH, FL 33060 Mailing Address

11 NORTHEAST 15TH AVE. POMPANO BEACH, FL 33060



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02202007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 65-1040730

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HINRICHSEN, UWE 11 NE 15 AVE POMPANO BEACH, FL 33060

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	e above named entity submits this statement for the purpose of cha e obligations of registered agent.	anging its registered office or registered agent, or both, in the	State of Florida. I am familiar with, and accept
SIGN	ATURE	(NOTE: Registered Agent alignature required when reinstating)	DATE
	Filing Fee is \$50.00 Due by May 1, 2007		
•	MANIACING MEMBERS MANIACEDS	<u> </u>	''

TITLE HINRICHSEN, ULRIKE NAME 860 SW 18 ST. STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33486 MGRV TITLE HINRICHSEN, UWE NALE 860 SW 18 ST. STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33486

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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company of the leceiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

TITLE NAME STREET ADDRESS CITY-ST-ZIP

MOLAGING MEMBER, OR AUTHORIZED REPRESENTATIVE