2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 28, 2008
Secretary of State

DOCUMENT# L02000006605

Entity Name: CREATIVE G LLC

Current Principal Place of Business:

4921 SAND DUNE CIRCLE
#101
WEST PALM BEACH, FL 33417

New Principal Place of Business:

3617 EAST SANDPIPER DRIVE
#7
BOYNTON BEACH, FL 33436

Current Mailing Address:

4921 SAND DUNE CIRCLE
#101
WEST PALM BEACH, FL 33417

New Mailing Address:

3617 EAST SANDPIPER DRIVE
#7
BOYNTON BEACH, FL 33436

FEI Number: 16-1633996 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

PELKOWSKI, THOMAS S
4921 SAND DUNE CIRCLE
#101
WEST PALM BEACH, FL 33417 US

Name and Address of New Registered Agent:

PELKOWSKI, THOMAS S
3617 EAST SANDPIPER DRIVE
#7
BOYNTON BEACH, FL 33436 US

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.

SIGNATURE: _____ 07/28/2008
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: PELKOWSKI, THOMAS
Address: 4921 SAND DUNE CIR #101
City-St-Zip: WEST PALM BEACH, FL 33417

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: PELKOWSKI, THOMAS
Address: 3617 EAST SANDPIPER DRIVE #7
City-St-Zip: BOYNTON BEACH, FL 33436

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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 or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: THOMAS PELKOWSKI MGRM 07/28/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date