2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 25, 2007
Secretary of State

DOCUMENT# L06000049343

Entity Name: CREATIVE CAPITAL, LLC

Current Principal Place of Business:

6097 BOCA COLONY DRIVE
#1621
BOCA RATON, FL 33433

New Principal Place of Business:

6097 BOCA COLONY DRIVE
#1621
BOCA RATON, FL 33433 US

Current Mailing Address:

6097 BOCA COLONY DRIVE
#1621
BOCA RATON, FL 33433

New Mailing Address:

6097 BOCA COLONY DRIVE
#1621
BOCA RATON, FL 33433 US

FEI Number: 56-2583274 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HOFFMAN, ALEJANDRO D
6097 BOCA COLONY DRIVE
#1621
BOCA RATON, FL 33433 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: HOFFMAN, ALEJANDRO D
Address: 6097 BOCA COLONY DRIVE
City-St-Zip: BOCA RATON, FL 33433

Title: MGRM (X) Delete
Name: ETBUL, ARIEL H
Address: LUIS MARIA CAMPOS 1700 4º B
City-St-Zip: BUENOS AIRES, BA 1402 AR

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: HOFFMAN, ALEJANDRO D
Address: 6097 BOCA COLONY DRIVE APT. 1621
City-St-Zip: BOCA RATON, FL 33433 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ALEJANDRO HOFFMAN MGRM 01/25/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date