

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000115577

FILED  
Jul 15, 2008  
Secretary of State

Entity Name: CREATIVE UPHOLSTERY, LLC

**Current Principal Place of Business:**

649 NE 79TH STREET  
MIAMI, FL 33138

**New Principal Place of Business:**

**Current Mailing Address:**

649 NE 79TH STREET  
MIAMI, FL 33138

**New Mailing Address:**

FEI Number: 26-2144330      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:**

MELTZER, RENAE  
11098 BISCAYNE BLVD. #201  
MIAMI, FL 33161 US

**Name and Address of New Registered Agent:**

FONTAN, CARLOS A  
647 NE 79 STREET  
6  
MIAMI, FL 33138 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: CARLOS A FONTAN

07/15/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: FONTAN ESTRADA, CARLOS A  
Address: 649 NE 79TH ST.  
City-St-Zip: MIAMI, FL 33138

Title: MGRM ( ) Delete  
Name: FONTAN, SINDY CASTILLO  
Address: 649 NE 79TH ST.  
City-St-Zip: MIAMI, FL 33138

Title: ST ( ) Delete  
Name: FERNANDEZ-DILLON,  
Address: 649 NE 79TH STREET  
City-St-Zip: MIAMI, FL 33138

**ADDITIONS/CHANGES:**

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

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

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

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: CARLOS A. FONTAN

MGRM

07/15/2008

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