

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000125336

FILED
Feb 13, 2008
Secretary of State

Entity Name: CREATIVE CAPITAL CONCEPTS OF BOCA RATON "LLC"

Current Principal Place of Business:

1200 N FEDERAL HWY
200
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

1200 N FEDERAL HWY
200
BOCA RATON, FL 33432

New Mailing Address:

FEI Number: 74-3244902 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VALDEUS, FRITZ
2713 HYPOLUXO ROAD
LAKEWORTH, FL 33462 US

Name and Address of New Registered Agent:

BIEN-AIME, LOSAIRE
8821 SANDY CREST LANE
BOYNTON BEACH, FL 33437 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: LOSAIRE BIEN-AIME

02/13/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BIEN-AIME, LOSAIRE
Address: 8821 SANDY CREST LANE
City-St-Zip: BOYNTON BEACH, FL 33437

Title: MGRM (X) Delete
Name: AUGUSTE, YVAIN
Address: 11723 ROCK LAKE TERRACE
City-St-Zip: BOYNTON BEACH, FL 33437

Title: MGRM (X) Delete
Name: VALDEUS, FRITZ
Address: 2713 HYPOLUXO ROAD
City-St-Zip: LAKE WORTH, FL 33462

Title: MGRM (X) Delete
Name: BIEN-AIME, MARC
Address: 1296 WATERWAY COVE DR
City-St-Zip: WELLINGTON, FL 33414

Title: MGRM (X) Delete
Name: PLAISUME, CARLINE
Address: 8821 SANDY CREST LANE
City-St-Zip: BOYNTON BEACH, FL 33437

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:

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: LOSAIRE BIEN-AIME

MGRM

02/13/2008

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