

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000009597

FILED  
Apr 15, 2009  
Secretary of State

Entity Name: CREATIVE SHOWERS & EVENTS, LLC

**Current Principal Place of Business:**

6030 NW 3RD STREET  
MARGATE, FL 33063

**New Principal Place of Business:**

**Current Mailing Address:**

6030 NW 3RD STREET  
MARGATE, FL 33063

**New Mailing Address:**

FEI Number: 26-1832494

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

THOMAS, KIMBERLY L  
6030 NW 3RD STREET  
MARGATE, FL 33063 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: MCFADDEN, SHARON H  
Address: 12300 NW 20TH COURT  
City-St-Zip: PLANTATION, FL 33323

Title: MGRM ( ) Delete  
Name: THOMAS, MAMIE H  
Address: 6030 NW 3RD STREET  
City-St-Zip: MARGATE, FL 33063

Title: MGRM ( ) Delete  
Name: HAYES, MARGARETTE  
Address: 7201 BANYAN WAY  
City-St-Zip: TAMARAC, FL 33321

Title: MGRM ( ) Delete  
Name: THOMAS, KIMBERLY L  
Address: 6030 NW 3RD STREET  
City-St-Zip: MARGATE, FL 33063

**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:

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: KIMBERLY L. THOMAS

MGRM

04/15/2009

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