2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 14, 2009
Secretary of State

DOCUMENT# L08000011272

Entity Name: THE CREATIVE SOLUTIONS SERVICES LLC

Current Principal Place of Business:

1710 SHORESIDE CIRCLE
WELLINGTON, FL 33414 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 131
LAKE WORTH, FL 33460 US

New Mailing Address:

FEI Number: 26-1833567 **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:

SAINT FLEUR, JACQUES
3162 LAUREL RIDGE CIRCLE
RIVERIA BEACH, FL 33414 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:	MRGM	( ) Delete
Name:	JEROME, SERGE JR.	
Address:	1710 SHORESIDE CIRCLE	
City-St-Zip:	WELLINGTON, FL 33414 US	
Title:	MGRM	( ) Delete
Name:	SAINT FLEUR, JACQUES	
Address:	3162 LAUREL CIRCLE	
City-St-Zip:	RIVERIA BEACH, FL 33404 US	
Title:	MGRM	( ) Delete
Name:	JEROME, SERGE SR.	
Address:	1710 SHORESIDE CIRCLE	
City-St-Zip:	WELLINGTON, FL 33414 US	
Title:	MGRM	( ) Delete
Name:	PIERRE, EVELYNE	
Address:	4200 COMMUNITY DRIVE	
City-St-Zip:	WEST PALM BEACH, FL 33407 US	
Title:	MGRM	( ) Delete
Name:	DORSET, MAXSON	
Address:	1618 WEST 26TH STREET	
City-St-Zip:	WEST PALM BEACH, FL 33404 US	

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: SERGE JEROME MR. 09/14/2009

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