

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L41416

FILED  
Apr 19, 2008  
Secretary of State

Entity Name: CUSTOM CREATIVE DESIGNS INC.

**Current Principal Place of Business:**

133 NE 100 ST  
MIAMI SHORES, FL 33138 US

**New Principal Place of Business:**

**Current Mailing Address:**

133 NE 100 ST  
MIAMI SHORES, FL 33138 US

**New Mailing Address:**

FEI Number: 65-0164982

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STALEY, WILLIAM  
133 NE 100 ST  
MIAMI SHORES, FL 33138 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PS ( ) Delete  
Name: WILLIAM, STANLEY  
Address: 133 NE 100 ST  
City-St-Zip: MIAMI SHORES, FL 33138

Title: VT ( ) Delete  
Name: STACEY, JODY ROWE  
Address: 133 NE 100TH STREET  
City-St-Zip: MIAMI SHORES, FL 33138

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM STALEY

PS

04/19/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date