

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002266

FILED  
Apr 28, 2012  
Secretary of State

**Entity Name:** CREATIVE CONCEPTS OF NIKA, INC.

**Current Principal Place of Business:**

528 NORTHWEST 19TH STREET  
MIAMI, FL 33136

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 6091  
MIAMI, FL 33101

**New Mailing Address:**

**FEI Number:** 55-0788670

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

ADKER, WILLENE  
528 NORTHWEST 19TH STREET  
MIAMI, FL 331361224 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

**OFFICERS AND DIRECTORS:**

Title: DV  
Name: MCINTOSH, NIKKI  
Address: 528 NORTHWEST 19TH STREET  
City-St-Zip: MIAMI, FL 331361224

Title: DST  
Name: MCINTOSH, TRANIKA  
Address: 528 NORTHWEST 19TH STREET  
City-St-Zip: MIAMI, FL 331361224

Title: DV  
Name: WALKER, TAURUS  
Address: 528 NORTHWEST 19TH STREET  
City-St-Zip: MIAMI, FL 331361224

Title: DP  
Name: ADKER, WILLENE  
Address: 528 NORTHWEST 19TH STREET  
City-St-Zip: MIAMI, FL 331361224

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: WILLENE ADKER

RA

04/28/2012

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

\_\_\_\_\_  
Date