


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90715 022 ****61.25

DOCUMENT # N03000005194 1. Entity Name CREATIVE CHILDREN THERAPY, INC.					
Principal Place of Business 1311 SW 126 PLACE MIAMI, FL 33184			Mailing Address 1311 SW 126 PLACE MIAMI, FL 33184		
2. Principal Place of Business 12608 SW 88th St			3. Mailing Address Same		
Suite, Apt. #, etc. 			Suite, Apt. #, etc. 		
City & State MIAMI FL			City & State 		
Zip 33186		Country DADE		Zip 	
Country 		Country 		4. FEI Number 54-2116901	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent RODRIGUEZ, LISSETTE 1311 SW 126 PLACE MIAMI, FL 33184			7. Name and Address of New Registered Agent Name RODRIGUEZ Lissette Street Address (P.O. Box Number is Not Acceptable) 12608 SW 88th St City MIAMI FL Zip Code 33186		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>Lissette Rodriguez</u> LISSETTE RODRIGUEZ <u>4/29/04</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MENENDEZ, LISSETTE 1311 SW 126 PLACE MIAMI, FL 33184	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	President MENENDEZ LISSETTE 1311 SW 126 PLACE MIAMI, FL 33184
		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD ORFILA, MARIA TE R 1311 SW 126 PLACE MIAMI, FL 33184	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	V. President Roberto Villasant 12608 SW 88th St Miami, FL 33186
		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PALACIO, SUSAN R 1311 SW 126 PLACE MIAMI, FL 33184	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Lissette Menendez</u> LISSETTE MENENDEZ <u>4/29/04</u> 305-412-4178 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

94079608



04292004 Chg-NP CR2E037 (10/03)

4. FEI Number **54-2116901** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MENENDEZ, LISSETTE 1311 SW 126 PLACE MIAMI, FL 33184	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD ORFILA, MARIA TE R 1311 SW 126 PLACE MIAMI, FL 33184	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PALACIO, SUSAN R 1311 SW 126 PLACE MIAMI, FL 33184	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President MENENDEZ LISSETTE 1311 SW 126 PLACE MIAMI, FL 33184	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V. President Roberto Villasant 12608 SW 88th St Miami, FL 33186	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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SIGNATURE: Lissette Menendez **LISSETTE MENENDEZ 4/29/04 **305-412-4178****
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #