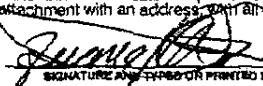


2004

CORPORATION ANNUAL REPORT

FILED
Mar 16, 2004 8:00 am
Secretary of State

03-16-2004 90019 008 ***158.75

DOCUMENT #N12000009186					
1. Entity Name CREACION DIVINA, INC.					
Principal Place of Business 15220 SW 296TH STREET LEISURE CITY, FL 33033			Mailing Address 15220 SW 296TH STREET LEISURE CITY, FL 33033		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
				Country	
4. FEI Number NOT APPLICABLE				Applied For Not Applicable	
5. Certificate of Status Desired ☒				5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
BARBOSA, JUANA 15220 SW 296TH STREET LEISURE CITY, FL 33033				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BARBOSA, JUANA 15220 SW 296TH STREET LEISURE CITY, FL 33033	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BARBOSA, JOSE 15220 SW 296TH STREET LEISURE CITY, FL 33033	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ESCORTIA, MARIA I 15220 SW 296TH STREET LEISURE CITY, FL 33033	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ESCORTIA, MARIA I 313 S. COMMERCIO CLEWISTON, FL 33440	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ESCORTIA, BENJAMIN 15220 SW 296TH STREET LEISURE CITY, FL 33033	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Escortia, Benjamin 313 S. COMMERCIO CLEWISTON, FL 33440	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ 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 507, 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: 					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date _____ Daytime Phone # _____					

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03102004 Chg-P CR2E034 (10/03)