

102  
PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
04 MAR -9 AM 8:00

DOCUMENT # P00000077550

1. Corporation Name

CREATIVE INDUSTRIES, INC

2. Principal Office Address

808 SOUTH PALM WAY

Suite, Apt. #, etc.

City & State

LAKE WORTH

Zip

FLORIDA

Country

US

3. Mailing Office Address

808 SOUTH PALM WAY

Suite, Apt. #, etc.

City & State

LAKE WORTH

Zip

FLORIDA

Country

US

REINSTATEMENT 03-04  
MRS

4. Date Incorporated or Qualified  
To Do Business in Florida

08/16/2000

5. FEI Number  
651036769

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

RICHARD WILLIAMS

Street Address (P.O. Box Number is Not Acceptable)

808 SOUTH PALM WAY

Suite, Apt. #, Etc.

City

LAKE WORTH

State

FL

Zip Code

33460

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of  
Registered Agent

*[Signature]*

Date

3-1-04

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	RICHARD WILLIAMS	808 SOUTH PALM WAY	LAKE WORTH, FL 33460

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

*[Signature]*

RICHARD K. WILLIAMS

3-1-04

501 588874

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (01/04)

292

**C.R. COOPER, CPA, PA**  
**1495 FOREST HILL BLVD STE B**  
**WEST PALM BEACH, FL 33406**

American Institute of  
Certified Public Accountants

(561) 964-6927  
(561) 432-0008

Florida Institute of  
Certified Public Accountants

FAX (561) 433-3596

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March 1, 2004

Division of Corporations  
Uniform Business Report Filings  
P. O. Box 6327  
Tallahassee, Florida 32314

Taxpayer: Creative Industries, Inc.  
FEIN: 65-1036769  
Tax Form: UBR  
Tax Period: 2003, 2004  
Document #: P00000077550

To Whom It May Concern:


We have enclosed check # 1185 in the amount of \$300.00 for the 2003 and 2004 Annual  
Renewal of the above corporation.

Please abate the penalty as Mr. Williams did not receive the original UBR, and did not  
intentionally avoid the filing fee.

Mr. Williams was out of the country on personal business in 2003.

Thank you for your prompt attention to this matter. Please contact our office if any  
further information or explanation is required.

Respectfully,

  
C. R. Cooper, CPA

Encl.

cc