

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 17, 2003 8:00 am
Secretary of State

0461630
AV

DOCUMENT # **P00000078824**

1. Entity Name
CREATIVE MORTGAGE BROKERS II, INC.



03-17-2003 90691 024 ***150.00

Principal Place of Business
**6702 N. GUNLOCK AVENUE
SUITE A
TAMPA FL 33614**

Mailing Address
**6702 N. GUNLOCK AVENUE
SUITE A
TAMPA FL 33614**



2. Principal Place of Business
1254 Alt. U.S. 19 North
Suite, Apt. #, etc.

3. Mailing Address
1254 Alt. U.S. 19 North
Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State
Tarpon Springs Florida
Zip
34689
Country
U.S.A.

City & State
Tarpon Springs Florida
Zip
34689
Country
U.S.A.

4. FEI Number
59-3664758

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**JEWITT, TIMOTHY P
6702 N. GUNLOCK AVENUE
SUITE A
TAMPA FL 33614**

7. Name and Address of New Registered Agent

Name
Jewitt, Timothy P.
Street Address (P.O. Box Number is Not Acceptable)
1254 Alt. U.S. 19 North
City
Tarpon Springs **FL** Zip Code
34689

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 **Timothy P. Jewitt President**
(NOTE: Registered Agent signature required when reinstating)

3-14-03
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
JEWITT, TIMOTHY P
933 LINN HARBOR CT.
TARPO SPRINGS FL 34689** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPD
BENINCASA, RALPH
19127 PORTOFINO DR.
TAMPA FL 33647** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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CITY-ST-ZIP
☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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☐ 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 607, 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: **Timothy P. Jewitt Pres** **3-14-03** **(627) 938-3295**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)