

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000005630	
1. Entity Name CREATIVE CHILD INVESTMENTS, INC.	



Principal Place of Business 714 NORTHWEST 32ND AVENUE MIAMI, FL 33125	Mailing Address 714 NORTHWEST 32ND AVENUE MIAMI, FL 33125
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



07122006 Chg-P CR2E034 (11/05)

4. FEI Number 65-1076526	Applied For ☐ Not Applicable
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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	
RIVERA, ABELARDO 714 NORTHWEST 32ND AVENUE MIAMI, FL 33125		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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006**

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RIVERA, ABELARDO 714 NORTHWEST 32ND AVENUE MIAMI, FL 33125	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	300078495723 09/08/06--01066--017 **700.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RIVERA, RITA 714 NORTHWEST 32ND AVENUE MIAMI, FL 33125	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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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 exemptions contained in Chapter 119, 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 _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR _____
Date _____ Daytime Phone # _____



Rivera Investments, LLC.
3525 N.W. 7th Street, Second Floor
Miami, Florida 33125

Department of State
DIVISION OF CORPORATIONS
P.O. Box 6198
Tallahassee, Fl 32314-6198

July 5th, 2006

"CORPORATE ANNUAL REPORTS"

To whom it may concern,

This letter is to notify you and the state of a mistake that was made while processing our annual reports through the internet. Attached is a copy of our annual reports and a copy of the confirmation which because of a computer "glitz" it never went through but they were processed in a timely matter. I spoke to customer service which explained to me that the safest and most convenient way would be to submit by mail with a detailed explanation as I have done. I would like to see the possibilities of re-submitting the annual reports, so that we are in compliance with the State of Florida. Also, I have attached a check in the amount of \$700.00 covering the cost of such annual report.

I sincerely apologies for the delay and wish we can process the attached information as soon as possible. Thank you in advance for your prompt attention to the matter at hand.

Sincerely,

A handwritten signature in black ink, appearing to read "A. Rivera".

Abelardo E. Rivera
President / CEO
pumpkin1924@aol.com
Cell: 786.412.4875

PHONE: 305.649.4777 / FACSIMILE: 305.649.2634