## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000074487

Entity Name: CALLIGRAPHY CREATIONS, INC.

FILED Jun 13, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

8921 SW 212 TERRACE 8811 SW 212 TERRACE MIAMI, FL 33189 MIAMI, FL 33189

**Current Mailing Address: New Mailing Address:** 

8921 SW 212 TERRACE 8811 SW 212 TERRACE MIAMI, FL 33189 MIAMI, FL 33189

FEI Number: 36-4458765 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MAGNI, VALERIA CRIADO, VALERIA 8921 SW 212 TERRACE 8811 SW 212 TERRACE MIAMI, FL 33189 MIAMI, FL 33189

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.

SIGNATURE: VALERIA CRIADO 06/13/2004

> Electronic Signature of Registered Agent Date

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

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: ( ) Delete

MAGNI, VALERIA Name: 8921 SW 212 TERRACE Address: City-St-Zip: MIAMI, FL 33189

Title: VΡ () Delete Name: CRIADO, FRANCISCO 8921 SW 212 TERRACE Address: MIAMI BEACH, FL 33139 City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition

CRIADO, VALERIA Name: 8811 SW 212 TERRACE Address: City-St-Zip: MIAMI, FL 33189

Title: VΡ (X) Change ( ) Addition

Name: CRIADO, FRANCISCO Address: 8811 SW 212 TERRACE MIAMI, FL 33189 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Ρ SIGNATURE: VALERIA CRIADO 06/13/2004