

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 OCT 17 PM 2:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000080075

1. Corporation Name

CREATIVE SUPPLIES, INC.

Principal Place of Business

16460 NW 82ND COURT
MIAMI LAKES FL 33016

Mailing Address

16460 NW 82ND COURT
MIAMI LAKES FL 33016

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country



REINSTATEMENT 03

4. Date Incorporated or Qualified
To Do Business in Florida

08/14/2001

5. FEI Number

65-1129889

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

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

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PD	GARCIA, ANA M	16400 NW 82ND COURT	MIAMI LAKES FL 33016

300023905963
10/17/03--01052--001 **150.00

300023905963
10/17/03--01052--002 **8.75

8. Name and Address of Current Registered Agent

GUERRA, LEONARDO J ESQ.
1801 WEST AVENUE
MIAMI BEACH FL 33139-1431

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

Ana M. Garcia
SIGNATURE REQUIRED
REGISTERED AGENT MUST SIGN

Date

10-14-03

11. 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:

Ana M. Garcia
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10-14-03 305-698-8928

CH2ED-040 (7/03)

October 14, 2003

Florida Department of State
Division of Corporations
Annual Report/Reinstatement Section

Attn: Head of Department

This letter is to inform you that Creative Supplies, Inc. did not receive the application for its 2003 corporation annual report/uniform business report form by mail. We are enclosing check #1143 for \$150.00 to cover the cost of the application plus check # 1145 for \$8.75 to cover the cost of a certificate of status.

Thank you very much for your understanding.

Ana M. Garcia, owner



Creative Supplies, Inc.

16460 NW 82nd Court

Miami, Fl 33016

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