2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

FILED DOCUMENT # P01000107331 Feb 07, 2006 08:00 AN **Secretary of State** CREATIVE CONSTRUCTION CONCEPTS CORP. Principal Place of Business Mailing Address 9837 NW 28 PLACE 9837 NW 28 PLACE CORAL SPRINGS, FL 33065 CORAL SPRINGS, FL 33065 01242006 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1150981 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 8. Name and Address of Current Registered Agent CARRASQUIL, EDWARD S DO NOT WRITE 9837 NW 28 PLACE CORAL SPRINGS, FL 33065 IN THIS SPACE 1. 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent algosture required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 13 \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fond Contribution. Added to Fees OFFICERS AND DIRECTORS 10. IIILE CARRASQUILLO, EDWARD S NAME STREET ADDRESS 9837 NW 28 PLACE CITY-ST-ZIP CORAL SPRINGS, FL 33065 UDDDDD424647 TALE 02/18/06-80060-011 150.00 PALACIO, JOHN L NAME STREET ADDRESS 9837 NW 28 PLACE CITY-51-ZIP CORAL SPRINGS, FL 33065 TITLE NAME STREET ADDRESS DO NOT WRITE CATY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP MLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP 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 appreciate like empowered.

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #