2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000046458

Entity Name: CREATIVE INSURANCE OPTIONS, INC.

FILED Jan 31, 2005 Secretary of State

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

1112 WESTON RD #274 10400 GRIFFIN RD WESTON, FL 33326

209

FT LD, FL 33328

Current Mailing Address: New Mailing Address:

1112 WESTON RD #274 10400 GRIFFIN RD WESTON, FL 33326 209 FT LD, FL 33328

FEI Number: 47-0862525 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:

PULCINI, FRANK PULCINI, FRANK 10400 GRIFFIN RD 1112 WESTON RD #274 WESTON, FL 33326 209 FT LD, FL 33328 US

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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

01/31/2005

Title: () Delete Title: (X) Change () Addition

PULCINI, FRANK PULCINI, FRANK Name: Name: 81112 WESTON RD #274 Address: 10400 GRIFFIN RD Address: City-St-Zip: WESTON, FL 33326 City-St-Zip: FT LD, FL 33328

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 Statutés. 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.

SIGNATURE: FRANK P PULCINI 01/31/2005 DIR