

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000062992

FILED
Feb 15, 2006
Secretary of State

Entity Name: C.M.V CREATIVE DESIGN, CORP.

Current Principal Place of Business:

15121 WHETSTONE WAY
SOUTHWEST RANCHES, FL 33331

New Principal Place of Business:

18643 SW 15ST.
PEMBROKE PINES, FL 33029

Current Mailing Address:

15121 WHETSTONE WAY
SOUTHWEST RANCHES, FL 33331

New Mailing Address:

18643 SW 15ST.
PEMBROKE PINES, FL 33029

FEI Number: 68-0507585

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOLLETT, CARLOS SR.
15121 WHETSTONE WAY
SOUTHWEST RANCHES, FL 33331 US

Name and Address of New Registered Agent:

LOLLETT, CARLOS SR.
18643 SW 15 ST.
PEMBROKE PINES, FL 33029 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:

02/15/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LOLLETT, CARLOS SR.
Address: 15121 WHETSTONE WAY
City-St-Zip: SOUTHWEST RANCHES, FL 33331

Title: VD () Delete
Name: LOLLETT, CARLOS JR.
Address: 15121 WHETSTONE WAY
City-St-Zip: SOUTHWEST RANCHES, FL 33331

Title: SD (X) Delete
Name: LOLLETT, MARIA B
Address: 15121 WHETSTONE WAY
City-St-Zip: SOUTHWEST RANCHES, FL 33331

Title: SD (X) Delete
Name: LOLLETT, VANESSA
Address: 15121 WHETSTONE WAY
City-St-Zip: SOUTHWEST RANCHES, FL 33331

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LOLLETT, VANESSA
Address: 18643 SW, 15 ST.
City-St-Zip: PEMBROKE PINES, FL 33029

Title: SD (X) Change () Addition
Name: LOLLETT, CARLOS SR.
Address: 18643 SW, 15ST.
City-St-Zip: PEMBROKE PINES, FL 33029

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: CARLOS M LOLLETT SR.

SD

02/15/2006

Electronic Signature of Signing Officer or Director

Date