

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000064700

FILED  
Apr 29, 2006  
Secretary of State

Entity Name: CREATIVE HOMEWORKS OF MIAMI, INC.

## Current Principal Place of Business:

13130 NW 30 AVE  
#2  
OPA LOCKA, FL 33054

## New Principal Place of Business:

## Current Mailing Address:

13130 NW 30 AVE  
#2  
OPA LOCKA, FL 33054

## New Mailing Address:

2230 NW 47 AVENUE  
LAUDERHILL, FL 33313

FEI Number: 42-1538508

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ELMORE, B J  
13400 SW 5 STREET  
DAVIE, FL 33325 US

## Name and Address of New Registered Agent:

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:

Title: S ( ) Delete  
Name: HOLMES, FAITH  
Address: 13130 NW 30 AVE  
City-St-Zip: OPALOCKA, FL 33054 US

Title: C ( ) Delete  
Name: HOLMES, KEVIN  
Address: 13130 NW 30 AVE  
City-St-Zip: OPALOCKA, FL 33054 US

Title: V ( ) Delete  
Name: HOLMES, PRIMROSE  
Address: 13130 NW 30 AVE  
City-St-Zip: OPALOCKA, FL 33054 US

Title: PRES ( ) Delete  
Name: HOLMES III, ABEL  
Address: 13130 NW 30 AVE #2  
City-St-Zip: OPALOCKA, FL 33054 US

Title: DIR ( ) Delete  
Name: HOLMES III, ABEL  
Address: 13130 NW 30 AVE #2  
City-St-Zip: OPALOCKA, FL 33054 US

Title: T ( ) Delete  
Name: HOLMES II, ABEL  
Address: 13130 NW 30 AVE  
City-St-Zip: OPALOCKA, FL 33054 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: ABEL HOLMES III

PRES

04/29/2006

Electronic Signature of Signing Officer or Director

Date