

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000064700

FILED
May 11, 2008
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:

2750 NW 58 ST
MIAMI, FL 33142

Current Mailing Address:

2230 NW 47 AVENUE
LAUDERHILL, FL 33313

New Mailing Address:

2750 NW 58 ST
MIAMI, FL 33142

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: BJ ELMORE

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: HOLMES, PRIMROSE PRES
Address: 2750 NW 58 ST
City-St-Zip: MIAMI, FL 33142 US

Title: VICE (X) Change () Addition
Name: HOLMES, ABEL VICE
Address: 2750 NW 58 ST
City-St-Zip: MIAMI, FL 33142 US

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 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

VICE

05/11/2008

Electronic Signature of Signing Officer or Director

Date