## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

of the corporation or th changed, or on an atta

SIGNATURE:

## **FILED** Aug 25, 2004 08:00 AM Secretary of State DOCUMENT # P02000069880 DISTINCT WEB CREATIONS, INC. Principal Place of Business Mailing Address **38 WISTERIA DRIVE 38 WISTERIA DRIVE** ORMOND BEACH, FL 32176 ORMOND BEACH, FL 32176 07072004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number 42-1542264 Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent SAVY, BENJAMIN DO NOT WRITE 18 PALM LEAF LANE PALM COAST, FL 32164 IN THIS SPACE 8. 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. Secretary lype to project to the constant and the Lappicable NOTE Replaceed Agent signature required when this sengi DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150,00 \$5.00 May Be in accordance with s. 607.193(2)(b), F.S., the Bue by September 8, 2004 Trust Fund Contribution. Added to Fee corporation did not receive the prior notice. 10. OFFICERS AND DIRECTORS TITLE NAME HOUSTON, DENISE K 000000170862 08/25/04-80003-008 150.00 STREET ADDRESS 38 WISTERIA DR CATY ST-ZIP ORMOND BEACH, FL 32176 TITLE MAME STREET ADDRESS CETY ST ZEP TITLE CAME STREET ADDRESS DO NOT WRITE CATY-ST-ZIF IN THIS SPACE TITLE NAME STREET ADDRESS CITY ST-ZIP BBF STREET ADDRESS CITY ST 78P BILE MANE STREET ADDRESS CBY-ST-78 Afters not qualify for the exemption stated in Section 1 9.07(3)(i). Florida Statutes, I further certify that the information accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if 12. I hereby certify that the in indicated on this report p dometion suppred with this a supplemental report is tru

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386-441-1357 Days me Poone #