P03000033728

(Re	questor's Name)
(Ad	dress)
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(Cit	y/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bu	siness Entity Name)
(Do	cument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:

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Nocharge News 3-11-09

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: CREATIVE Accent Inc. (Name of Corporation)
DOCUMENT NUMBER: PO3 900033 728
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kathy Reyna (Name of Contact Person)
CREATIVE Accort Inc. (Firm/Company)
4153 SW 47 AVE #1360 (Address)
David, # 33314 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (954), 797-1671 (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



February 25, 2009

MIGUEL REYNA CREATIVE ACCENT, INC. 6769 S.W. 39 COURT DAVIE, FL 33314

SUBJECT: CREATIVE ACCENT, INC.

Ref. Number: P03000033728

We have received your document for CREATIVE ACCENT, INC. and check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The wrong form was submitted.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 809A00006620

SECRETARY OF STATE TALL AHASSEE, FLORIDA

2009 MA O 1 AAM 8:00

"RECEIVED



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Thelma Lewis
Document Specialist Supervisor

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Creative Accent, Inc.
2. The principal office address: 4153 SW 47 AVC, #136
<u> </u>
3. The mailing address (if different):
4. Date of incorporation/qualification: 3/25/03 Document number: P03000 33 728
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Miguel A. Beyng
16113 E. Downers Dr.
Loxahatcher, Kr 33470
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Miguel A. Reyna
4153 SW 47 AUR, #136
Davie, K 33314
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the porporation has been notified in writing of the change.
(Spenture of an officer or affector) Miguel Reyro (Pented or typed name and title)
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name)

* * * FILING FEE: \$35.00 * * *