2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000086451

Entity Name: CREATIONS UNLIMITED INTL. INC.

FILED Mar 16, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Finicipal Flace of Dusiness.	New Fillicipal Flace of Dusiliess.

132 KENSINGTON WAY ROYAL PALM BEACH, FL 33414

Current Mailing Address: New Mailing Address:

132 KENSINGTON WAY P.O. BOX 212859

ROYAL PALM BEACH, FL 33414 ROYAL PALM BEACH, FL 33421

FEI Number: 26-0080386 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LIRIANO, GRISELLE E PRES

132 KENSINGTON WAY

132 KENSINGTON WAY

132 KENSINGTON WAY

ROYAL PALM BEACH, FL 33414 US ROYAL PALM BEACH, FL 33414 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: GRISELLE LIRIANO 03/16/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition Title: () Delete Title: LIRIANO, GRISELLE E LIRIANO, GRISELLE E PRES Name: Name: 132 KENSINGTON WAY 132 KENSINGTON WAY Address: Address: City-St-Zip: ROYAL PALM BEACH, FL 33414 City-St-Zip: ROYAL PALM BEACH, FL 33414

ty-st-zip. Notae Pativi Beach, tie 33414

Title: Title: VΡ (X) Change () Addition () Delete Name: MUNOZ. LOURDES Name: CIRIACO, MARIA L VP 4430 COUNTRY GROVE 132 KENSINGTON WAY Address: Address: WEST PALM BEACH, FL 33406 ROYAL PALM BEACH, FL 33414 City-St-Zip: City-St-Zip:

Title: () Delete Title: S () Change (X) Addition

 Name:
 Name:
 MUNOZ, LOURDES

 Address:
 Address:
 4430 COUNTRY GROVE

 City-St-Zip:
 City-St-Zip:
 WEST PALM BEACH, FL 33406

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GRISELLE LIRIANO P 03/16/2005