

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000086644

FILED
Feb 24, 2005
Secretary of State

Entity Name: CREATIVE FAUX STYLE, INC.

Current Principal Place of Business:

261 NE 19TH AVENUE
APT. # 7
DEERFIELD BEACH, FL 33441 US

New Principal Place of Business:

Current Mailing Address:

261 NE 19TH AVENUE
APT. # 7
DEERFIELD BEACH, FL 33441 US

New Mailing Address:

FEI Number: 20-0222583 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FORMAN, TERRY J
1521 SW LEJEUNE ROAD
CORAL GABLES, FL 33134 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: P/S () Delete
Name: CAVALLINO, FRANKE
Address: 261 NE 19TH AVENUE, APT. #7
City-St-Zip: DEERFIELD BEACH, FL 33441 US

Title: D () Delete
Name: CAVALLINO, FRANKE
Address: 261 NE 19TH AVENUE, APT. #7
City-St-Zip: DEERFIELD BEACH, FL 33441 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: FRANKE CAVALLINO

P/S

02/24/2005

Electronic Signature of Signing Officer or Director

Date