JUN-11-2007 14:55 From:

and the

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jun 18, 2007 8:00 am Secretary of State

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1. Entity Nam	MENT # P0300010 E DESIGN & FAUX, INC.	4243						
Principal Place	o of Business	Mailing Address						
5409 COVE (-	5409 COVE CIRCLE		ļ				
NAPLES, FL		NAPLES, FL 33119			_	001025	d	
no ila, il	33113	100,100,10			 	601925'		
2. Principal P	lace of Business - No P.O. Box #	3. Muiling Address						
			Sulte, Apt. #, Atc.		05212007	Chg-P	CR2E034 (12/06)	
City & State City & State				-	4. FEI Number 20-0585		Not	Applicable
Zip	Country	/ip	Coun	iry	<u> </u>	of Status Desired	\$8.75 Addi	
	6. Name and Address of Curror	п коризтого дуепт		Name	7. Name 200	HORIGA DI ROM R	aftereren witeur	
WALKED	MONEOUE S ESO				_	_		
WALKER, MONEQUE S ESQ 8260 WEST FLAGLER STREET STE 1E MIAMI, FL 33144			Street Address (P.O. Box Number is Not Aggregatible)					
				City			FL Zip Code	-
	named ontity submits this statement tions of registered agent.	for the purpose of changing its	regist e re	ed office or register	ed agent, or bott	n, in the Glate of Fic	orida I am familiar with, o	and accept
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SIGNATUHE.	Septial and, hyperited printed tearing of september sequen	pot and title if applicable. (NOT	E: Rogintora	d Ageni elgnésure required	wnon reinsterion)		BAIL	—
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	LE NOW!!! FEE IS \$550.00 ue by September 14, 2007	9. Election Campa Trust Fund Con			.00 May Be ed to Fees			
10.	OFFICERS AN	ID DIRECTORS	11	-	ADDITIONS/	CHANGES TO OFF	ICERS AND DIRECTORS	IN 11
ITTLE	PVTS	Paleta	πn				☐ Change	Addition
NAME	TORDJMAN MAURICE	7	NAM				,	_
STHEET ADDRESS	5409 DOVE CIRCLE		STAC	ET ADDRESS				
CITY-51-ZIP	NAPLES, FL 33118		ĊIŦY	-ST-Z#P				
मााम	D	Daleta	TITL				∐ Change	☐ Addition
NAME	TORDJMAN, MAURICE	<u>-</u>	NAM	١				
STREET ADDRESS	5409 COVE CIRCLE		STRE	ET ADDRESS				
CITY-ST-ZIP	NAPLES, FL 33119		CITY	- ST-ZIP	_			
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i indicatéd	d on this report or supplemental repor	ded bee steward and are not at tr	inv siuru	duro shed heve the	same legal effec	t as it made under	cath; that I am an officer	or director
l of the co	rporation or the receiver or trusted on for on an attachment with an address	apowarad to axeaute this repor	t as requ	irod by Chapter 80	r, Honda Statule	s; and that my nart	e appears in Block 10 or	r DAGCK 11 I/
		11 -				4/1	2/07	
SIGNAT	rure:							
1	SIGNATURE AND TYPED	PRINTED HAMB OF SIGNING OFFICE	r or direc	TOR		Clate /	Daylein Michig &	



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Annual Re	port Online Filin	ng		
Document Number				
Business Entity Na	me CREATIVE DESIGN & FA	AUX, INC.		
which the er	st of each year, a late ch ntity did not receive prio not received.	_	•	-
FEI Number	200585144			
FEI Number Status	■ Listed Above C Applied	For C Not Applicable		
Certificate of Statu	s Desired C Yes • No 9	\$8.75 each		
Election Campaign	Financing Trust Fund Contr	ibution C Yes @ No		
Principal Place	e of Business			
Address	5409 COVE CIRCLE			
Suite, Apt. #, etc.				
City, State	NAPLES	, FL		
Zip Code & Countr	y 33119			
Mailing Addre	ss			
Address	5409 COVE CIRCLE	-		
Suite, Apt. #, etc.				
City, State	NAPLES	, FL		
Zip Code & Countr	y 33119			
Name And Add	dress of Registered A	gent		
Name (Last First I	Middle Title) WALKER	MONEQUE	ESQ	

- OR -

Business to serve as RA

www.sunbiz.org - Department of State

ATTACHMENT 1010019257 Page 2 of 4

•	# P03000/04
Address	8260 WEST FLAGLER STREET STE 1E
Suite, Apt. #, etc.	
City, State	MIAMI , FL
Zip Code & Country	33144 US
Signature' block below to accept the	ent, the new agent will need to type their name in the 'Registered Agent designation of registered agent. RA signature must be an individual an individual must sign on their behalf. A business entity cannot serve as
Registered Agent Signature	Moneque Walker
This signature must be that of the the full knowledge and permissio s.831.06, Florida Statutes.	e individual "signing" this document electronically or be made with on of the individual, otherwise it constitutes forgery under
Officer/Director Name /	And Address
Name And Address #1	
Title	MGR
Name (Last, First, Middle, Title - OR -	TORDJMAN ,MAURICE ,
Entity Name to serve as Office	r/Director
Street Address	5409 COVE CIRCLE
City, State	NAPLES , FL
Zip Code & Country	33119
Name And Address #2	
Title	MGR
Name (Last, First, Middle, Title) - OR -	TORDJMAN MAURICE , ,
Entity Name to serve as Officer	r/Director
Street Address	5409 COVE CIRCLE
City, State	NAPLES , FL
Zip Code & Country	33119
Name And Address #3	
Title	

www.sunbiz.org - Department o	ATTACHMENT 100	019267 Page 4 of	
City, State	7.	2000104243	
Zip Code & Country			
An individual named above or an inc in the 'Officer/Director Signature' blo	dividual signing on behalf of an entity named above muck below. A corporate name is not allowed in this bloc	ust type their name k.	
Title MGR			
Officer/Director Signature	MAURICE TORDJMAN	_	
the full knowledge and permission	e individual "signing" this document electronically on of the individual, otherwise it constitutes forge individual "signing" this document affirms that the	ry under	
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Document Number

P03000104243

Business Entity Name

CREATIVE DESIGN & FAUX, INC.

Prior notice was

Received

FEI Number

200585144

FEI Number Status

Certificate of Status Desired No

Election Campaign Financing Trust Fund Contribution No

Principal Place of Business

Address

5409 COVE CIRCLE

City, State

NAPLES, FL

Zip Code & Country 33119

Mailing Address

Address

5409 COVE CIRCLE

City, State

NAPLES, FL

Zip Code & Country 33119

Name And Address of Registered Agent

Name (Last, First, Middle, Title) WALKER, MONEQUE, S, ESQ

Address

8260 WEST FLAGLER STREET STE 1E

City, State

MIAMI, FL

Zip Code & Country

33144 US

Registered Agent Signature

MONEQUE WALKER

Officer/Director Name And Address

Name And Address #1

ATTACHMENT

Title

MGR

106019257 #P03000104243 Name (Last, First, Middle, Title) TORDJMAN, MAURICE

Street Address

5409 COVE CIRCLE

City, State

NAPLES, FL

Zip Code & Country

33119

Name And Address #2

Title

MGR

Name (Last, First, Middle, Title) TORDJMAN, MAURICE Street Address 5409 COVE CIRCLE

City, State

NAPLES, FL

Zip Code & Country

33119

Title

MGR

Officer/Director Signature MAURICE TORDJMAN

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Division of Corporations

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Document Number

Business Entity Name

P03000104243

200585144

CREATIVE DESIGN & FAUX, INC.

FEI Number

FEI Number Status

Certificate of Status Desired

No

Election Campaign Financing Trust Fund Contribution No

Principal Place of Business

Address

5409 COVE CIRCLE

Suite, Apt. #, etc.

City, State

NAPLES, FL

Zip Code & Country 33119

Mailing Address

Address

5409 COVE CIRCLE

Suite, Apt. #, etc.

City, State

NAPLES, FL

Zip Code & Country 33119

Name and Address of Registered Agent

Name (Last, First, Middle, Title) WALKER, MONEQUE, S, ESQ

Address

8260 WEST FLAGLER STREET STE 1E

Suite, Apt. #, etc.

City, State

MIAMI, FL

Zip Code & Country

33144 US

Registered Agent Signature

Officer/Director Name and Address

PVTS

Name (Lust, First, Middle, Title)

TORDIMAN, MAURICE

Street Address

5409 COVE CIRCLE

City, State

NAPLES, FL

Zip Code & Country

33119

JUN-11-2007 14:55 From: Division of Corporations 2392164096

To:19545875721

P.3/8
Page 2 of 2

ATTACHMENT

1-

Title

Name (Last, First, Middle, Title)

Street Address

City, State Zip Code & Country D

TORDIMAN, MAURICE

5409 COVE CIRCLE

NAPLES, FL

33119

Title

PVT\$

Officer/Director Signature MAURICE TORDJMAN

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