

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000107279

Entity Name: CREOR USA, INC.

FILED  
Jan 08, 2004  
Secretary of State

**Current Principal Place of Business:**

14 NE 1ST AVE.  
907  
MIAMI, FL 33132

**New Principal Place of Business:**

14 NE 1ST AVE.  
907B  
MIAMI, FL 33132

**Current Mailing Address:**

14 NE 1ST AVE.  
907  
MIAMI, FL 33132

**New Mailing Address:**

FEI Number: 20-0261768      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SABRI, CHAKIB  
866 NW 126TH DR  
CORAL SPRINGS, FL 33071 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 ( ) Delete  
Name: SABRI, CHAKIB  
Address: 866 NW 126TH DR  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: VP ( ) Delete  
Name: MESA, JUAN C  
Address: 540 SE 23RD LANE  
City-St-Zip: HOMESTEAD, FL 33033

**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 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: CHAKIB SABRI

P

01/08/2004

Electronic Signature of Signing Officer or Director

Date