


**2005 FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 11, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P03000125126</b> 1. Entity Name <b>FIREFLY CREATIONS, INC.</b>	
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Principal Place of Business <b>757 SE 17TH STREET #911 FORT LAUDERDALE, FL 33316</b>	Mailing Address <b>757 SE 17TH STREET #911 FORT LAUDERDALE, FL 33316</b>
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**DO NOT WRITE IN THIS SPACE**



03052005 No Chg-P CR2E034 (10/03)

4. FEI Number <b>20-0454350</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  <b>NICOLE VIEHMEYER 757 SE 17TH STREET #911 BOCA RATON, FL 33316</b>	<b>DO NOT WRITE IN THIS SPACE</b>
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>DP BROWN, NANCIE 757 SE 17TH STREET #911 FORT LAUDERDALE, FL 33316</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>DST VIEHMEYER, NICOLE 3055 BURRIS ROAD DAVIE, FL 33314</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Nicole Viehmeier **03/05/05** **(954) 448-5910**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #