## 2004 FOR PROFIT CORPORATION REINSTATEMENT

## **DOCUMENT # P03000132772** 1. Entity Name CREATIVE WORLD UNLIMITED DESIGN, INC. Principal Place of Business Mailing Address 4085 HUNTINGTON FOREST BLVD 2321 KALADIN RD. JACKSONVILLE, FL 32211 JACKSONVILLE, FL 32257 2. Principal Place of Business 2321 Caladium Ro 3. Mailing Address 2321 Caladium Ro Suite, Apt. #, etc. Suite, Apt. #, etc. 12272004 REIN-P CR2E098 (6/04) 4. FEI Number City & State City & State Applied For **LLorida** 55-08523 acksonuille acksonuille Not Applicable 立つへ Country \$8.75 Additional 5. Certificate of Status Desired usB <u>42</u>µ J211 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Valle CASTILLO, JESUS R 4085 HUNTINGTON FOREST BLVD JACKSONVILLE, FL 32257 City Cacksonville 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. me of registered agent and title if applicable (NOTE: Registered Agent signature regulared when reinstating FILE NOW!H FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. After January 1, 2005, Fee will be \$300.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE ☐ Delate IIILE Change ☐ Addition TRINIDAD, JOSE R NAME Triniclad Tose R 2321 Caladium Rd Tuck-sonville FL 32211 2321 KALADIN RD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32211 CITY - ST - 7IP TITLE ☐ Delete TITLE Change Addition Trujilo, Sheila 2331 Caladium Rd Jacksonville FC 32211 TRUJILLO, SHEILA NAME MAME STREET ADDRESS 2321 KALADIN RD. STREET ADDRESS JACKSONVILLE, FL 32211 CITY-ST-ZIP CiTY-ST-ZIP ☐ Delale TITLE Change ☐ Addition TITLE NAME. NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-2P Addition TITLE ☐ Delete TITLE NAME NAME 12/30/04---01013---009 \*\*158.75 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CiTY-ST-ZIP TITLE ☐ Delete **TITLE** Change Addition NAME MARKE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS City-ST-ZIP CITY-ST-7IF 12. 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 cortify 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. 12.28.04 SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR