## 2006 FOR PROFIT CORPORATION

## **FILED** Mar 27, 2006 08:00 AM **ANNUAL REPORT Secretary of State** DOCUMENT # P03000157252 CREPMAKER OF SUNSET PLACE, INC. Principal Place of Business Mailing Address 14365 SW 142ND STREET 8925 S.W 148 STREET MIAMI, FL 33186 SUITE # 200 MIAMI, FL 33186 03112008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied Far 20-2364411 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HOFFMAN, CHRISTOPHER OWNER DO NOT WRITE 14365 SW 142 STREET MIAMI, FL 33186 IN THIS SPACE 8. The above named entit its this statement for th ging its registered office or registered agent, or both, in the State of Floriga. I am familie, with, and accept the obligations of regis d agent SIGNATURE (NOTE, Registered Apept Signature required when reinstating) FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME HOFFMAN, CHRISTOPHER 18402 SW 87TH PLACE STREET ADDRESS UU0000482564 CITY-ST-ZIP MIAMI, FL 33157 04/11/06-80079-007 158.75 TITLE MAME STREET ADDRESS City-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I nereby certify that the intermation si indicated on this report of supplement of the corporation or the receiver of the changed, or on an attachment with a e exemptions contained in Chapter 119, Florida Statutes: I further certify that the information by signature shall have the same legal effect as if made under oath, that I am ap officer or director as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

SIGNATURE

NAVE STREET ADDRESS CITY-ST-ZIP

> SIGNATURE AND TYPED OR IGNING OFFICER OR DIRECTOR

Oxytime Phone 6