2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000101901

FILED Feb 10, 2005 Secretary of State

Entity Name: CUSTOM CREATIONS & RESTORATIONS, INC.

Current P	rincipal Place	of Business:	New Principal Place	of Business:
97365 AM YULEE, F				
Current Mailing Address:		New Mailing Address:		
97365 AM YULEE, F				
FEI Number	: 26-0091268	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of C	urrent Registered Agent:	Name and Address o	of New Registered Agent:
DAVIS, RO 97365 AM YULEE, F	Y DR			
	e named entity s e of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,
	e of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,
in the Stat	e of Florida.	submits this statement for the particles in the particles in Signature of Registered Ag		d office or registered agent, or both, Date
in the Stat SIGNATU	e of Florida. RE: Electron			
in the Stat SIGNATU Election Ca	e of Florida. RE: Electron	ic Signature of Registered Ag	ent	
in the Stat SIGNATU Election Ca	e of Florida. RE: Electron mpaign Financing S AND DIREC	ic Signature of Registered Agg Trust Fund Contribution (). TORS: Delete	ent	Date
in the Stat SIGNATU Election Ca OFFICER Title: Name: Address:	e of Florida. RE: Electron mpaign Financing S AND DIREC P () DAVIS, ROBER 97365 AMY DR YULEE, FL 320	ic Signature of Registered Age Trust Fund Contribution (). TORS: Delete T Delete Delete	ADDITIONS/CHANGI Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT DAVIS P 02/10/2005