

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000137701

FILED
Feb 13, 2006
Secretary of State

Entity Name: CREATIVE EDGE INVESTORS, INC.

Current Principal Place of Business:

PMB 251, 3665 E BAY DRIVE
204
LARGO, FL 33771

New Principal Place of Business:

Current Mailing Address:

PMB 251, 3665 E BAY DRIVE
204
LARGO, FL 33771

New Mailing Address:

FEI Number: 32-0128479

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SLAVIK, JOHN M
3595 GARDENIA PLACE
#4
LARGO, FL 33771 US

Name and Address of New Registered Agent:

SLAVIK, JOHN M
8282 GREENBRIAR RD
LARGO, FL 33777 US

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: JOHN M. SLAVIK

02/13/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D, P () Delete
Name: SLAVIK, JOHN M
Address: 3595 GARDENIA PLACE #4
City-St-Zip: LARGO, FL 33771

Title: ST () Delete
Name: SLAVIK, ANNETTE B
Address: 3595 GARDENIA PLACE #4
City-St-Zip: LARGO, FL 33771

Title: DV () Delete
Name: SLAVIK, JOHN W JR
Address: 5211 NW 77TH COURT
City-St-Zip: POMPANO BEACH, FL 33073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D, P (X) Change () Addition
Name: SLAVIK, JOHN M
Address: 8282 GREENBRIAR RD
City-St-Zip: LARGO, FL 33777

Title: ST (X) Change () Addition
Name: SLAVIK, ANNETTE B
Address: 8282 GREENBRIAR RD
City-St-Zip: LARGO, FL 33777

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: JOHN M. SLAVIK

D, P

02/13/2006

Electronic Signature of Signing Officer or Director

Date