

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000079953

FILED  
Jun 02, 2008  
Secretary of State

Entity Name: ILOKKA CREATIVE ENVIRONMENTS, INC.

**Current Principal Place of Business:**

17555 COLLINS AVE TS1  
SUNNY ISLES BCH, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

17555 COLLINS AVE TS1  
SUNNY ISLES BCH, FL 33160

**New Mailing Address:**

FEI Number: 20-3045891      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

STEVEN K. BAIRD  
5981 NE SIXTH AVE  
MIAMI, FL 33137 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: HAREZI, ILOKKA J  
Address: 17555 COLLINS AVE TS1  
City-St-Zip: SUNNY ISLES BCH, FL 33160

Title: SD ( ) Delete  
Name: MERIWEATHER, BRUCE  
Address: 17555 COLLINS AVE TSI  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: TD ( ) Delete  
Name: POWELL, DAVID  
Address: 17555 COLLINS AVE TSI  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: ILOKKA HAREZI

D

06/02/2008

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date