

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000101940

FILED  
Jan 23, 2007  
Secretary of State

Entity Name: CRETE-ATIVE DECORATIVE SERVICES INC

## Current Principal Place of Business:

26915 MAGNOLIA BLVD  
LUTZ, FL 33559 US

## New Principal Place of Business:

## Current Mailing Address:

26915 MAGNOLIA BLVD  
LUTZ, FL 33559 US

## New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BULLARD, FRANKLIN T  
5324 LAND O LAKES BLVD  
MAIL TO PO BOX 1066  
LAND O LAKES, FL 33559 US

## Name and Address of New Registered Agent:

BULLARD, FRANKLIN T  
5324 LAND O LAKES BLVD  
LAND O LAKES, FL 34639 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: FRANKLIN T BULLARD

01/23/2007

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: P ( ) Delete  
Name: BIRMINGHAM, JUSTIN  
Address: 26915 MAGNOLIA BLVD  
City-St-Zip: LUTZ, FL 33559 US

Title: VP ( ) Delete  
Name: COULOMBE, ANTHONY S  
Address: 3920 DEL VALLE AVE  
City-St-Zip: TAMPA, FL 33614 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: ST (X) Change ( ) Addition  
Name: BIRMINGHAM, JUSTIN  
Address: 26915 MAGNOLIA BLVD  
City-St-Zip: LUTZ, FL 33559 US

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: JUSTIN BIRMINGHAM

P

01/23/2007

Electronic Signature of Signing Officer or Director

Date