

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000115589

Entity Name: CREATIVE ART & DECO INC

FILED  
Apr 30, 2008  
Secretary of State

## Current Principal Place of Business:

9469 SW 52 PL  
COOPER CITY, FL 33328

## New Principal Place of Business:

7526 NOVA DR  
DAVIE, FL 33317

## Current Mailing Address:

9469 SW 52 PL  
COOPER CITY, FL 33328

## New Mailing Address:

7526 NOVA DR  
DAVIE, FL 33317

FEI Number: 20-3550364

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CABRA, LUZ S  
9469 SW 52 PL  
COOPER CITY, FL 33328 US

## Name and Address of New Registered Agent:

CABRA, LUZ S  
7526 NOVA DR  
DAVIE, FL 33317 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: LUZ S CABRA

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: CABRA, LUZ S  
Address: 9469 SW 52 PL  
City-St-Zip: COOPER CITY, FL 33328

Title: V ( ) Delete  
Name: CARVAJAL, LUZ A  
Address: 9469 SW 52 PL  
City-St-Zip: COOPER CITY, FL 33328

Title: S ( ) Delete  
Name: CARVAJAL, LUZ A  
Address: 9469 SW 52 PL  
City-St-Zip: COOPER CITY, FL 33328

Title: T ( ) Delete  
Name: CABRA, LUZ S  
Address: 9469 SW 52 PL  
City-St-Zip: COOPER CITY, FL 33328

## 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:

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: LUZ S CABRA

P

04/30/2008

Electronic Signature of Signing Officer or Director

Date