

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000088037

**FILED**  
**Oct 30, 2008**  
**Secretary of State**

**Entity Name:** CREATIVE MILLWORK & MOLDING INC.

**Current Principal Place of Business:**

325 SWAIN BLVD #2  
GREEN ACRES, FL 33463

**New Principal Place of Business:**

325 SWAIN BLVD  
#2  
GREEN ACRES, FL 33463

**Current Mailing Address:**

325 SWAIN BLVD #2  
GREEN ACRES, FL 33463

**New Mailing Address:**

11484 BLUE VIOLET LANE  
ROYAL PALM, FL 33411

**FEI Number:** 26-0654260

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORPORATE CREATIONS NETWORK, INC.  
11380 PROSPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410 US

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

CORPORATE CREATIONS NETWORK, INC.  
11380 PROSPERITY FARMS ROAD  
#221E  
PALM BEACH GARDENS, FL 33410 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: DANIEL SARMIENTO

10/30/2008

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: HIRSH, ROBERT  
Address: 325 SWAIN BLVD #2  
City-St-Zip: GREEN ACRES, FL 33463

Title: D ( ) Delete  
Name: SARMIENTO, DANIEL  
Address: 325 SWAIN BLVD #2  
City-St-Zip: GREEN ACRES, FL 33463

Title: D ( ) Delete  
Name: COPENHAVER, PAUL  
Address: 325 SWAIN BLVD #2  
City-St-Zip: GREEN ACRES, FL 33463

**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: PAUL COPENHAVER

D

10/30/2008

Electronic Signature of Signing Officer or Director

Date