2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000119271

Entity Name: CREATEWELL ENTERTAINMENT INC.

FILED Jun 30, 2008 Secretary of State

Current Principal Place of Business:				N	New Principal Place of Business:		
SUITE 340	PORATE DRIVE DERDALE, FL		US			TH AVENUE PARK, FL 33334	US
Current Mailing Address:				N	New Mailing Address:		
SUITE 340	PORATE DRIVE DERDALE, FL		US			TH AVENUE PARK, FL 33334	US
FEI Number: 2	26-1341257	FEI Numb	er Applied For ()	FEI Numbe	er Not Applic	able () Certifi	cate of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered							gistered Agent:
GOLDBERG, ADAM S 1792 BELL TOWER LANE WESTON, FL 33326 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.							
SIGNATUR		Signatur	e of Registered Agen	t			 Date
Election Cam		Trust Fund	the corporation did not r I Contribution ().				FICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	D (X) E FRENKEL, DEBR 2117 N 14TH AVE HOLLYWOOD, F	ENUE	s	Ni Ad	tle: ame: ddress: ity-St-Zip:	() Change	e()Addition
Title: Name: Address: City-St-Zip:	D () C GILCHRIST, CAR 201 W 38TH STR KANSAS CITY, M	EET APT.		Ni Ad	tle: ame: ddress: ity-St-Zip:	()Change	e () Addition
Title: Name: Address: City-St-Zip:	D () E MATHIS, HARRIE 2901 N.E. 21ST T FORT LAUDERD	ERRACE	3306 US	Ni Ad	tle: ame: ddress: ity-St-Zip:	()Change	e()Addition
Title: Name: Address: City-St-Zip:	D () E RASSLER, SCOT 1000 CORPORAT FORT LAUDERDA	Τ ΓΕ DRIVE,		N: A:	tle: ame: ddress: ity-St-Zip:	()Change	e()Addition
Title: Name: Address: City-St-Zip:	D () E SHOEMAKER, W 4850 N.E. 13TH A OAKLAND PARK,	VENUE	US	N: Ad	tle: ame: ddress: ity-St-Zip:	D, P (X) Change SHOEMAKER, WILLIAN 4850 N.E. 13TH AVENU OAKLAND PARK, FL 3	E
Title: Name: Address: City-St-Zip:	D () C SPANGLER, DAV 1600 N.E. 18TH A FORT LAUDERDA	VENUE	3305 US	N: Ac	tle: ame: ddress: ity-St-Zip:	()Change	e () Addition

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: WILLIAM E. SHOEMAKER PRES 06/30/2008