

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000126924

FILED  
Sep 10, 2009  
Secretary of State

Entity Name: CREATIVE MARKETING AND INVESTMENT, INC

## Current Principal Place of Business:

4047 OKEECHOBEE BLVD  
115  
WEST PALM BEACH, FL 33409

## New Principal Place of Business:

## Current Mailing Address:

4047 OKEECHOBEE BLVD  
115  
WEST PALM BEACH, FL 33409

## New Mailing Address:

FEI Number: 35-2316903      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ANTOINE, ISAAC SR  
10617 OLD HAMMOCK WAY, STE 115  
WELLINGTON, FL 33414 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: P ( ) Delete  
Name: ANTOINE, NATACHA B  
Address: 10617 OLD HAMMOCK WAY  
City-St-Zip: WELLINGTON, FL 33414

Title: VP ( ) Delete  
Name: ANTOINE, REBECA  
Address: 10617 OLD HAMMOCK WAY  
City-St-Zip: WELLINGTON, FL 33414

Title: CFO ( ) Delete  
Name: ANTOINE, ISAAC  
Address: 10617 OLD HAMMOCK WAY  
City-St-Zip: WELLINGTON, FL 33414

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change ( ) Addition  
Name: ANTOINE, ISAAC  
Address: 10617 OLD HAMMOCK WAY  
City-St-Zip: WELLINGTON, FL 33414

Title: CFO ( ) Change (X) Addition  
Name: RONY, EVELINE  
Address: 1725 LAVUE AVE NORTH  
City-St-Zip: LAKE WORTH, FL 33460

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: ISAAC ANTOINE

VP

09/10/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date