

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000001606

Entity Name: CREATIVE RECYCLING SYSTEMS, INC.

FILED
Apr 18, 2007
Secretary of State

Current Principal Place of Business:

8108 KRAUSS BLVD #110
TAMPA, FL 33619

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 19120
TAMPA, FL 336869120 US

New Mailing Address:

FEI Number: 59-3217435

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YOB, JONATHAN A
8108 KRAUSS BLVD #110
TAMPA, FL 33619 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: YOB, JONATHAN
Address: 7501 INTERBAY BLVD
City-St-Zip: TAMPA, FL 33616

Title: V () Delete
Name: YOB, JOSEPH JR
Address: 7501 INTERBAY BLVD
City-St-Zip: TAMPA, FL 33616

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: YOB, JONATHAN
Address: 8108 KRAUSS BLVD SUITE 110
City-St-Zip: TAMPA, FL 33619

Title: V (X) Change () Addition
Name: YOB, JOSEPH JR
Address: 8108 KRAUSS SUITE 110
City-St-Zip: TAMPA, FL 33619

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: JONATHAN A. YOB

P

04/18/2007

Electronic Signature of Signing Officer or Director

Date