

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

DOCUMENT # P94000020895

1. Entity Name  
CREATIVE CHOICE HOMES X, INC.



Principal Place of Business  
4243 NORTHLAKE BLVD.  
SUITE D  
PALM BEACH GARDENS, FL 33410

Mailing Address  
4243 NORTHLAKE BLVD.  
SUITE D  
PALM BEACH GARDENS, FL 33410

**DO NOT WRITE IN THIS SPACE**

01222004 No Chg-P CR2E034 (10/03)

4. FEI Number  
65-0476995

Applied For  
Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

BAROT, DILIP  
4243 NORTHLAKE BLVD.  
SUITE D  
PALM BEACH GARDENS, FL 33410

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	SVP
NAME	WEIR, JOHN F
STREET ADDRESS	4243-D NORTHLAKE BLVD.
CITY-ST-ZIP	PALM BEACH GARDENS, FL
TITLE	S
NAME	KAKKAR, YASH PAL
STREET ADDRESS	4243-D NORTHLAKE BLVD.
CITY-ST-ZIP	PALM BCH GARDENS, FL 33410
TITLE	TDP
NAME	BAROT, DILIP
STREET ADDRESS	4243-D NORTHLAKE BLVD.
CITY-ST-ZIP	PALM BEACH GARDENS, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

500030383745  
03/12/04--01050--021 \*\*158.75

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

Yash Pal Kakkar, Secretary

1/22/04

(561) 627-7988

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #