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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P94000037957 (5)**

FILED Mar 12 1998 8:00am Secretary of State

CREATIVE DECORATING, INC. Principal Place of Business Mailing Address 217 AKRON AVE. 217 AKRON AVE. STUART FL 34994 STUART FL 34994 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/19/1994 2. Principal Place of Business 2a. Mailing Address 4. FÉI Number Applied For 65-0530867 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Ζip Zip Country Country 8. This corporation owes or has paid the current year Intangible Tes 24 25 Personal Property Tax due June 30. 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 61 Name SANFORD, SUZAN 785 N.W. SABLE STREET Street Address (P.O. Box Number is Not Acceptable) PORT ST. LUCIE FL 34983 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition 1.1 TITLE TIBLE SANFORD, SUZAN 1.2 NAME NAME 785 N.W. SABLE STREET STREET ADDRESS 1.3 STREET ADDRESS PORT ST. LUCIE FL 34983 CITY-ST-ZIP 1.4 C(TY-ST-ZIP DELETE 21 TITLE Change ☐ Addition TITLE CLAUS, HAROLD NAME 2.2 NAME 1203 RAILROAD ST. STREET ADORESS 2.3 STREET ADDRESS JENSEN BEACH FL 34957 CITY-ST-ZIP 2. 4 CITY - ST-ZIP DELETE ☐ Change ☐ Addition TITLE 3.1 TITLE NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition 5.1 TITLE ☐ Change NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP CITY-ST-ZIP

14. 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 annual 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 ompowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.

SIGNATURE: Suran Santord, Suzan Sanford, president 3/5/98 2/9-4282