

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000068633

1. Entity Name

CREATIVE INSPIRATIONS, INC.

FILED
May 22, 2000 8:00 am
Secretary of State

05-22-2000 90003 001 ***150.00

Principal Place of Business

5901 CYPRESS RD
 PLANTATION FL 33317-2524
 US

Mailing Address

5901 CYPRESS RD
 PLANTATION FL 33317-2524
 US

2. Principal Place of Business

333 N.W. 70th Ave.
 Suite, Apt. #, etc.
 Suite 103

3. Mailing Address

333 N.W. 70th Ave.
 Suite, Apt. #, etc.
 Suite 103

City & State

Plantation, Florida

City & State

Plantation, Florida

Zip

33317

Country

U.S.A.

Zip

33317

Country

U.S.A.

4. FEI Number

65-0527127

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

GOLDBERG, NANCY GROSS
 5901 CYPRESS ROAD
 PLANTATION FL 33317-2524

7. Name and Address of New Registered Agent

Name

Gerald S. Goldberg

Street Address (P.O. Box Number is Not Acceptable)

333 N.W. 70th Ave., Suite 103

City

Plantation

FL

Zip Code

33317

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.

SIGNATURE Gerald S. Goldberg, Vice-President

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Gerald S. Goldberg, V.P. 4/30/2000

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	GOLDBERG, NANCY	
STREET ADDRESS	5901 CYPRESS ROAD	
CITY-ST-ZIP	PLANTATION FL 33317	
TITLE	VP	<input type="checkbox"/> Delete
NAME	GOLDBERG, GERALD	
STREET ADDRESS	5901 CYPRESS ROAD	
CITY-ST-ZIP	PLANTATION FL 33317	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Goldberg, Nancy	
STREET ADDRESS	333 N.W. 70th Ave., Suite 103	
CITY-ST-ZIP	Plantation, Florida 33317	
TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Goldberg, Gerald	
STREET ADDRESS	333 N.W. 70th Ave., Suite 103	
CITY-ST-ZIP	Plantation, Florida 33317	
TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Goldberg, Nancy	
STREET ADDRESS	333 N.W. 70th Ave., Suite 103	
CITY-ST-ZIP	Plantation, Florida 33317	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Nancy Goldberg, President Nancy Goldberg, President 4/30/00 954-581-8913
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)