

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



DEPARTMENT OF STATE
SECRETARY OF STATE
Tallahassee, Florida
January 1, 1996

DOCUMENT # P94000069327 (2)

CREATIVE PROPERTY MAINTENANCE, INC.

RECEIVED
MAY 11 AM 2:03

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

Principal Office (City and State)

Alternate Address

20063 NW 55TH CT LOT #6
MIAMI FL 33055

20063 NW 55TH CT LOT #6
MIAMI FL 33055

3. Date of Report (Month/Day/Year)

09/19/1994

3a. Date of Last Report

2. Principal Office (City and State)
21. 2320 Gulfstream Dr.
22. Miami, FL
23. 33023
24. 33023
25. 33023
26. 2320 Gulfstream Dr.
27. Miami, FL
28. 33023
29. 33023
30. 33023

4. Filing Number
65-0520344

Applied For
Not Applicable

5. Certificate of Status (Leave Blank)

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

7. Total amount of fees paid (including any late fees) (Leave Blank)

8. Total amount of fees paid (including any late fees) (Leave Blank)

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CONNORS, KRISTIE
20063 NW 55TH CT LOT #6
MIAMI FL 33055

B1 Name
Kristie Connors
B2 Street Address (P.O. Box Number is Not Applicable)
2320 Gulfstream Dr.
B3 MIAMI, FL
B4 City
FL
B5 Zip Code
33023

11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the above named corporation is duly organized under the laws of the State of Florida, and that the foregoing information is true and correct. I am a resident of the State of Florida, and I am duly qualified to act as a registered agent for the corporation.

Signed and sworn to before me on this 19th day of September, 1994.

12. OFFICERS AND DIRECTORS

D
CONNORS, KRISTIE
20063 NW 55TH CT LOT #6
MIAMI FL 33055

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (Leave Blank)

P
Connors, Kristie
2320 Gulfstream Dr.
MIAMI, FL 33023

14. I, the undersigned, being a resident of the State of Florida, do hereby certify that the information supplied with this filing is, voluntarily furnished, and that it is true and correct. I am a resident of the State of Florida, and I am duly qualified to act as a registered agent for the corporation.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF BRANCH OFFICER OR DIRECTOR

9-16-95 964-5426