

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000077431

1. Entity Name

CREATIVE SERVICES AND THEME EVENTS, INC.

f

FILED
Aug 03, 2000 8:00 am
Secretary of State

08-03-2000 90029 006 ***158.75

Principal Place of Business

4380 36TH STREET
SUITE E
ORLANDO FL 32811
US

Mailing Address

4380 36TH STREET
SUITE E
ORLANDO FL 32811-6506
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

delete Suite E

Suite, Apt. #, etc.

delete Suite E

City & State

City & State

4. FEI Number

59-3276077

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LANGLEY, RICHARD H
700 ALMOND ST
CLERMONT FL 34712-0188

Name

Karen M. Johnson

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

11206 Crescent Bay Blvd.

City

Clermont

FL

Zip Code

34711

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

Karen M. Johnson Karen M. Johnson

3/14/00

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input type="checkbox"/> Delete
NAME	JOHNSON, DARREN	
STREET ADDRESS	11206 CRESCENT BAY BLVD	
CITY-ST-ZIP	CLERMONT FL 34711	
TITLE	STD	<input type="checkbox"/> Delete
NAME	JOHNSON, KAREN	
STREET ADDRESS	11206 CRESCENT BAY BLVD	
CITY-ST-ZIP	CLERMONT FL 34711	
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
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VP/S/T/D	<input checked="" 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		
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:

Karen M. Johnson Karen M. Johnson 3/14/00

(407) 648-1133

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Creative Services of Florida

Attachment
DH# P9400077431
DW76350

- Magnificent Florals
- Dynamic Theme Parties
- Electrifying Entertainment
- Sensational Special Events

July 24, 2000

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Attn: Tyrone
Ref: Number: P94000077431

Please be advised that the above referenced document was mailed to you on April 28, 2000 along with a check, #13957, for \$158.75. The check was submitted without a signature and you returned it to us without the Business Report. Your cover letter said you would hold the UBR on file until you received the signed check. You have again returned the check saying you never received the document!

I am forwarding a copy of the original form and check #13957 in the amount of \$158.75. Please waive any late payment fees as the report and original were timely.

Feel free to contact me if I can be of further assistance.

Yours truly,



Alice M. Walsh
Controller

4380 36th Street
Orlando, FL 32811
Ph: (407) 648-1133
Fax: (407) 648-5580