## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P95000018412

MIAMI, FL 33173

City-St-Zip:

Entity Name: CREATIVE SPANISH GROUP, INC.

FILED Apr 24, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
10720 CAF SUITE 225	RIBBEAN BLV	)		
	BAY, FL 33189	US		
Current Mailing Address:			New Mailing Address:	
10720 CAF SUITE 225	RIBBEAN BLVI	)		
	, BAY, FL 33189	US		
FEI Number	: 65-0562904	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:	
KLAUS, KI 10720 CAF MIAMI, FL	RIBBEAN BLV	D., SUITE 225		
	named entity s e of Florida.	submits this statement for the	ourpose of changing its registered	d office or registered agent, or both,
SIGNATUI	RE:			
	Electron	ic Signature of Registered Ag	ent	Date
Election Car	mpaign Financing	Trust Fund Contribution ( ).		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () OLIVA, ONANE' 8741 S.W. 85TI MIAMI, FL 331	H TERRACE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	D () ARROLIGA, RIO 8741 SW 85 TE MIAMI, FL 331	RRACE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	P () ARROLIGA, RIC 8741 SW 85 TE MIAMI, FL 331	RRACE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address:	VP () OLIVA, ONANE` 8741 SW 85 TE		Title: Name: Address:	( ) Change ( ) Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: ONANEY M. OLIVA VP 04/24/2009