

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000051774

FILED
Apr 28, 2006
Secretary of State

Entity Name: PARK AVENUE CREATIVE DESIGNS, INC.

Current Principal Place of Business:

3350 N.W. 2ND AVENUE
SUITE A-2
BOCA RATON, FL 33431

Current Mailing Address:

P.O. BOX 880
BOCA RATON, FL 33429

New Principal Place of Business:

3350 N.W. 2ND AVENUE
SUITE A-44
BOCA RATON, FL 33431

New Mailing Address:

3350 NW 2ND AVE
SUITE A-4
BOCA RATON, FL 33431

FEI Number: 65-0610100

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CALIENDO, SAM S
3350 NW 2ND AVENUE
SUITE A-44
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CALIENDO, SAM S
Address: 3350 NW 2ND AVENUE, SUITE A-2
City-St-Zip: BOCA RATON, FL 33431

Title: D () Delete
Name: BARONE, JOANNE F
Address: 3550 NW 2ND AVENUE, SUITE A-2
City-St-Zip: BOCA RATON, FL 33431

Title: D () Delete
Name: COURTNEY, CALIENDO
Address: PO BOX 880
City-St-Zip: BOCA RATON, FL 33429

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CALIENDO, SAM S
Address: 3350 NW 2ND AVENUE, SUITE A-44
City-St-Zip: BOCA RATON, FL 33431

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: SAM CALIENDO

D

04/28/2006

Electronic Signature of Signing Officer or Director

Date