2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000009325

Address:

City-St-Zip:

325 WEST GORE STREET

ORLANDO, FL 32806

Entity Name: CREATIVE CONCEPTS OF ORLANDO, INC.

FILED Jul 01, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 325 WEST GORE STREET ORLANDO, FL 32806 **Current Mailing Address: New Mailing Address:** 325 WEST GORE STREET ORLANDO, FL 32806 FEI Number: 59-3421580 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: LYON BERGHOLTZ, & KIRWIN P LYON, & KIRWIN P 338 W MORSE BLVD 390 N ORANGE AVÉNUE, STE 2180 ORLANDO, FL 32801 SUITE 150 WINTER PARK, FL 32789 US 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: BRIAN KIRWIN 07/01/2002 Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition FABREGAT, GUSTAVO FABREGAT, GUSTAVO Name: Name: 325 WEST GORE STREET 325 WEST GORE STREET Address: Address: City-St-Zip: ORLANDO, FL 32806 City-St-Zip: ORLANDO, FL 32806 () Delete Title: Title: () Change () Addition BISHOP, WAYNE Name: Name: 325 WEST GORE STREET Address: Address: ORLANDO, FL 32806 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition ARNDT, TIMOTHY Name: Name: 325 W GORE STREET Address: Address: City-St-Zip: ORLANDO, FL 32806 City-St-Zip: Title: () Delete Title: () Change () Addition ARNDT, JO ANN Name: Name:

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

Address:

City-St-Zip:

SIGNATURE: GUSTAVO FABREGAT VP 07/01/2002