## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 06, 2007 08:00 A Secretary of State **DOCUMENT # P97000039798** 1. Entity Name CREATIVE TOPPERS INC. Principal Place of Business Mailing Address 18544 US 19 N 18544 US 19 N CLEARWATER, FL 33764 CLEARWATER, FL 33764 No Chg-P 04012007 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3444487 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BLAIS, BETTY DO NOT WRITE 601 N HERCULES AVE APT #605 CLEARWATER FL 33764 IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOWIII FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE BLAIS, BETTY NAME STREET ADDRESS 601 N HERCULES AVE APT #605 CITY-ST-ZIP CLEARWATER, FL 33765 U00000692756 TITLE 04/16/07-80012-021 150.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-7IP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment wirtyan address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-73P

**FILED**