

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P97000087091

1. Entity Name
CREATIVE SCIENCE CORP.



Principal Place of Business
5377 ASCOT BEND
BOCA RATON, FL 33496

Mailing Address
5377 ASCOT BEND
BOCA RATON, FL 33496 US

**FILED
Apr 30, 2008 08:00 AM
Secretary of State**



01192008 No Chg-P CR2E034 (11/05)

| | |
|----------------------------------|---------------------------------------------------------|
| 4. FEI Number 65-0796077 | Applied For Not Applicable |
| 5. Certificate of Status Desired | <input type="checkbox"/> \$8.75 Additional Fee Required |

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

WEINBERG, MYRON
5377 ASCOT BEND
BOCA RATON, FL 33496

**DO NOT WRITE
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: *Myron S. Weinberg*

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

(NOTE: Registered Agent signature required when reinstating)

DATE: *4/27/08*

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution: \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE: D
NAME: WEINBERG, MYRON
STREET ADDRESS: 5377 ASCOT BEND
CITY-ST-ZIP: BOCA RATON, FL 33496

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
CITY-ST-ZIP:

12. I hereby certify that the information supplied with this filing 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 with an address, with all other like empowered.

SIGNATURE: *Myron S. Weinberg*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**DO NOT WRITE
IN THIS SPACE**