FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000098825

CREATIVE CHOICE HOMES YIV INC

CULTAILAE	OLIGIOE	LICIVIES	VIA' HAO	

Mailing Address

4243 NORTHLAKE BLVD., STE. D PALM BEACH GARDENS FL 33410

Principal Place of Business

4243 NORTHLAKE BLVD., STE. D PALM BEACH GARDENS FL 33410

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90018 014 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed 4414714007

							11/1//199/			·	
2. Principal P	lace of Business	2a. Mailir	ng Address				4. FEI Number	-	Ap	plied For	
21		26					65-0795871		No.	t Applicable	
Suite, Apt.	#, etc.	Suite	, Apt. #, etc.				5. Certifcate of Status Desired		\$8.75 A Fee Re		
City & State	Α		& State				6. Election Campaign Financing		\$5.00	May Be	
— ·		28				J	Trust Fund Contribution		Added 1	,	
23 Zip	Country	Zip		Count			8. This corporation owes the curre	ent vear Int	angible		
24	25	29	. 30	_	•		Personal Property Tax.		∐Yes	□No	
24]	9. Name and Address of Current			<u> </u>		L	10. Name and Address of New R	egistered	Agent .		
	3, Hallo alla Mallood II dell'elle				11 Name						
BAR	ot, dilip			ļ_	32 Street						
	4243 NORTHLAKE BLVD., STE. D					t Address	Address (P.O. Box Number is Not Acceptable)				
	M BEACH GARDENS FL 33410			-	33						
1,100					~			_			
	•			1	34 City			FL	85 Zip (Code	
									• <u> </u>	nioto and	
office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State of m familiar with, and accept the obligation	f Florida. Su	ch change was auti	horized I	by the corp	a corpora poration's	s board of directors. I hereby accep	it the appoi	ntment as re	gistered	
SIGNATURE								===			
	Signature, typed or printed name of registered agent a				gent signature	required wh	nen reinstating)	DATE	ID DIDEOT(DC IN 42	
12.	OFFICERS AND	DIRECTOR		13.		1 -	ADDITIONS/CHANGES TO OF	-ICERS AN	Change	Addition	
TITLE	D		☐ DELETE	1.1 TITE	E	D/F	P/T.		TE CHANGE	Addition	
NAME	BAROT, DILIP			1.2 NAM	E	'					
STREET ADDRESS	4243 NORTHLAKE BLVD., STE.	D		1.3 STR	EET ADORESS	s					
CITY-ST-ZIP	PALM BEACH GARDENS FL 334	110 _		1.4 CITY	-ST-ZIP						
TITLE	S		☐ DELETE	2.1 TITL	E				Change	Addition	
NAME	LANCZI, ANITRA D			2.2 NAM	E						
STREET ADDRESS	4242-D NORTHLAKE BLVD			2.3 STR	EET ADDRESS	s	•				
CITY-ST-ZIP	PALM BEACH GARDENS FL 334	110		2 4 CIT	Y-ST-ZIP	1					
TITLE	T		DELETE	3.1 TITL					☐ Change	☐ Addition	
NAME	BAROT, DILIP			3.2 NAW							
	4243-D NORTHLAKE BLVD				EET ADDRESS	s					
STREET ADDRESS	PALM BEACH GARDENS FL 334	LIA				~ [
CITY-ST-ZIP	FALM DEACH GARDENS PL 334	riv	□ DELETE	4.1 TITL	Y-ST-ZIP	+			Change	K Addition	
TITLE			C OFFEIG			SV					
NAME]			4. 2 NA			eir, John F.	D1			
STREET ADDRESS	ļ				EET ADDRESS	S 42	.43-D Northlake Ilm Beach Garder	PTAG	[. 33/1	n	
CITY-ST-ZIP			77.5	-	-ST-ZIP	Pa	IIM Beach Garden	13, FI	C 3341	X Addition	
TITLE			□ DELETE	5.1 TITL		VF	,		∪ change	▼ I woning	
NAME				5.2 NAM		W	neat, Timothy P. 243-D Northlake	,			
STREET ADDRESS	1			5.3 STR	EET ADDRESS	s 42	243-Ď Northläke	Blvd		•	
CITY-ST-ZIP				4	r-ST-ZIP	Pa	ılm Beach Garder	ıs, FI			
TITLE			☐ DELETE	6.1 TTTL	E				☐ Change	☐ Addition	
NAME	1			6.2 NAM	re	1					
STREET ADDRESS				6.3 STR	EET ADDRESS	s					
C. ILL. I DUILLO	1			0.40	/ CT 710	ł					

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.