Applied For

\$8.75 Additional

Fee Required

\$5:00 May Be

Added to Fees

Not Applicable

⊠ No

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

PROFIT CORPORATION ANNUAL REPORT

4000

BENZAQUEN, EDMOND

PLANTATION FL 33324

7600 PLANTATION ROAD

24



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90084 016 ***150.00

1999	DIVI
DOCUMENT # 1. Corporation Name	P98000016525
CREATIVE HOLDING.	INC.

Principal Place of Business Mailing Address 7600 PLANTATION ROAD 7600 PLANTATION ROAD PLANTATION FL 33324 PLANTATION FL 33324 2a. Mailing Address 2. Principal Place of Business 26 21 Suite, Apt. #, etc. Suite, Apt. #, etc. 27 22 -City & State City & State 23

28 Zip Country Zip Country 30 25 29 9. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed

02/20/1998

1552 180 - 22

This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

5. Certificate of Status Desired

6. Election Campaign Financing Trust Fund Contribution

Personal Property Tax.

1600 PLANTATION

Street Address (P.O. Box Number is Not Acceptable)

PLANTATION FL

Name BENZAQUEN EDMOND

4. FEI Number

			84 City	****		FL 85 Z# C	Code
office or re	to the provisions of Sections 607.0502 and 607 egistered agent, or both, in the State of Florida. In familiar with, and accept the obligations of, S	Such change was auth	iorized by the corpo	corporation submits oration's board of din	this statement for the pur ectors. I hereby accept the	pose of changing its e appointment as rec	registered gistered
SIGNATURE	Signature, typed or printed name of registered agent and title if ap	DICADIO (NOTE: Re	BENZA gistered Agent signature	equired when reinstating)	TRESIDENT	03/03	199
12.	OFFICERS AND DIRECT		13.	ADDITION	IS/CHANGES TO OFFIC	ERS AND DIRECTO	
TITLE	PSTD	DELETE	1.1 TITLE	PSTD		☐ Change	Addition
NAME	BENZAQUEN, EDMOND		1.2 NAME	BENZAG	WEN ENW	OND	
STREET ADDRESS	1531 DAYTONIA ROAD		1.3 STREET ADDRESS	7/m Pla	LUEN EBM NATION P	Road	
CITY-ST-ZIP	MIAMI BEACH FL 33141		1,4 CITY-ST-ZIP	DI DACT	ATION A	1. 3332	4
TITLE		☐ DELETÉ	2.1 TITLE	1 -77/4.		Change	Addition
NAME	<i>,</i>		2.2 NAME				
STREET ADDRESS	·		2.3 STREET ADDRESS				
CITY-ST-ZIP			2. 4 CITY-ST-ZIP			·	
TITLE		☐ DELETE	3.1 TITLE	_		☐ Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4 CITY-ST-ZIP				
TITLE		☐ DELETE	4.1 TITLE		<u></u>	☐ Change	☐ Addition
NAME			4. 2 NAME			4	
STREET ADDRESS		!	4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP			*	
TITLE		☐ DELETE	5.1 TITLE			☐ Change	Addition
NAME			5.2 NAME			•	
STREET ADDRESS			5.3 STREET ADDRESS				,
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		☐ DELETE	6 1 TITLE		,	☐ Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP			6.4 CITY- ST- ZIP				
14. I hereby of indicated officer or	certify that the information supplied with this filin on this annual report or supplemental annual director of the corporation or the receiver or trus or Block 13 if changed, or or an attachment with	port is true and accurate stee empowered to exe	te and that my sign cute this report as	ature shall have the required by Chapter)(i), Florida Statutes. I fui same legal effect as if ma 607, Florida Statutes; an	ther certify that the in ade under oath; that in d that my name appe	nformation am an ears in

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82

SIGNATURE: