


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2007 8:00 am
Secretary of State

04-13-2007 90178 026 ***150.00

DOCUMENT # P98000026060	
1. Entity Name CREATIVE SALES GROUP, INC.	

Principal Place of Business 12794 W. FOREST HILL BLVD. STE 15A WELLINGTON, FL 33414	Mailing Address 1092 JOHNNIE DODDS BLVD B-3 MOUNT PLEASANT, SC 29464
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2. Principal Place of Business - No P.O. Box # 4179 129th AVE	3. Mailing Address 4179 129th AVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State West Palm Beach, FL	City & State West Palm Beach, FL
Zip 33411	Zip 33411
Country Palm Beach	Country Palm Beach

400000001



04112007 Chg-P CR2E034 (12/06)

6. Name and Address of Current Registered Agent HABERMAN, PHIL 12794 W. FOREST HILL BLVD. SUITE 15A WELLINGTON, FL 33414	
7. Name and Address of New Registered Agent Name Haberman, Phil Street Address (P.O. Box Number is Not Acceptable) 4179 129th AVE City West Palm Beach FL Zip Code 33411	

4. FEI Number 65-0822616	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

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  DATE **4-11-07**

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PRES FREY, CHARLES A 1092 JOHNNIE DODDS BLVD B-3 MOUNT PLEASANT, SC 29464 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPR HABERMAN, PHILIP S 12794 W. FOREST HILL BLVD. WELLINGTON, FL 33414 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:  **Phil Haberman VICE-PRES** DATE **561-422-1188**