2005 FOR PROFIT CORPORATION ANNUAL REPORT

May 03, 2005 08:00 AM **DOCUMENT # P98000042649 Secretary of State** CREATIVE IMAGES INTERNATIONAL CORP. Principal Place of Business Mailing Address 3821-B TAMIAMI TRAIL 3821-B TAMIAMI TRAIL SUITE 333 SUITE 333 PORT CHARLOTTE, FL 33952 PORT CHARLOTTE, FL 33952 CR2E034 (10/03) 02242005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FFI Number 65-0837480 Not Applicable \$8.75 Additional Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent **AMERILAWYER** DO NOT WRITE 343 ALMERIA AVENUE IN THIS SPACE CORAL GABLES, FL 33134 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 Signature, typed or printed name of registered agent and little if applicable. (NOTE, Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 10. **PSTD** TITLE WADE, CAROL E NAME STREET ADDRESS 3821 B TAMIAMI TRAIL #333 PORT CHARLOTTE, FL 33952 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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

FILED