

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000045689

1. Entity Name

CREATIVE OFFICE CONCEPTS AND SOLUTIONS, INC.

Principal Place of Business

415 DEBRA DR.
BRANDON FL 33510

Mailing Address

415 DEBRA DR.
BRANDON FL 33510-4006

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

FILED
May 21, 2001 8:00 am
Secretary of State

05-21-2001 90357 039 ***150.00



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3511752**

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KUHN, LOUISE E
415 DEBRA DR.
BRANDON FL 33510

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00.
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PSD
KUHN, LOUISE E-
415 DEBRA DR
BRANDON FL 33510 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Delete

TITLE
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STREET ADDRESS
CITY - ST - ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME ☐ Change ☐ Addition

STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME ☐ Change ☐ Addition

STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ Addition

TITLE
NAME ☐ Change ☐ Addition

STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ Addition

TITLE
NAME ☐ Change ☐ Addition

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other filers empowered.

SIGNATURE:

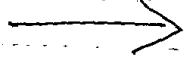
Louise E. Kuhn Louise E. Kuhn 2-9-00 (913) 654-0636

Attachment

845165

P98000045689

I am not
sure if sent
already, I can
not find my
2001 form



She advised
me this would
be fine & I
would not get
a penalty!

Thank You!
5-1-01 Louis Kuhn