

FILED
Mar 29, 1999 8:00 am
Secretary of State

03-29-1999 90028 001 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P98000052120 1. Corporation Name CREATIVE DESIGN CONCEPTS, INC.			
Principal Place of Business 3704 S.W. 7TH AVE. CAPE CORAL FL 33914		Mailing Address 3704 S.W. 7TH AVE. CAPE CORAL FL 33914	
2. Principal Place of Business 21. Suite, Apt. #, etc. 22. City & State 23. Zip 24. Country		2a. Mailing Address 25. Suite, Apt. #, etc. 26. City & State 27. Zip 28. Country	
9. Name and Address of Current Registered Agent BEAUREGARD, RONALD E 3704 S.W. 7TH AVE. CAPE CORAL FL 33914		10. Name and Address of New Registered Agent 81. Name 82. Street Address (P.O. Box Number is Not Acceptable) 83. City 84. Zip Code	

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/11/1998	
4. FEI Number 650840871	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing - Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax. ☒ Yes ☐ No	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE President	☐ DELETE	1.1 TITLE RONALD BEAUREGARD	☐ Change ☒ Addition
NAME President		1.2 NAME 3704 SW 7TH AVE	
STREET ADDRESS 3704 SW 7TH AVE		1.3 STREET ADDRESS CAPE CORAL FL 33914	
CITY-ST-ZIP CAPE CORAL FL 33914		1.4 CITY-ST-ZIP CAPE CORAL FL 33914	
TITLE Vice President	☐ DELETE	2.1 TITLE LILLIAN BEAUREGARD	☐ Change ☒ Addition
NAME Vice President		2.2 NAME 3704 SW 7TH AVE	
STREET ADDRESS 3704 SW 7TH AVE		2.3 STREET ADDRESS CAPE CORAL FL 33914	
CITY-ST-ZIP CAPE CORAL FL 33914		2.4 CITY-ST-ZIP CAPE CORAL FL 33914	
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 	☐ Change ☐ Addition
NAME 		4.2 NAME 	
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 	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(2)(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.

SIGNATURE: Ronald E. Beauregard Ronald E. Beauregard 3-18-99
 Date Daytime Phone # 941-541-0063

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