

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000028817

1. Entity Name

CREATION STUDIOS, INC. ✓

FILED

Sep 15, 2000 8:00 am  
Secretary of State

09-15-2000 90019 049 \*\*\*550.00

Principal Place of Business

4804 U.S HWY 19  
PALMETTO FL 34221

Mailing Address

4804 U.S HWY 19  
PALMETTO FL 34221

AVU/8604

2. Principal Place of Business

4301 32ND. ST. W.

Suite, Apt. #, etc.

SUITE E-9

3. Mailing Address

4301 32ND. ST. W.

Suite, Apt. #, etc.

SUITE E-9

City & State

BRADENTON, FL

City & State

BRADENTON, FL

4. FEI Number

65-0920558

Applied For

Not Applicable

Zip

34205

Country

USA

Zip

34205

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

COLE, GLEN C

4804 U.S HWY 19

PALMETTO FL 34221

7. Name and Address of New Registered Agent

Name

GLEN C. COLE

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

6451 SEA GULL DRIVE #263

City

BRADENTON, FL

FL

Zip Code

34210

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

GLEN C. COLE - PRESIDENT

9/11/00

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 \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**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 D ☐ Delete  
NAME COLE, GLEN C  
STREET ADDRESS 4804 U.S HWY 19  
CITY-ST-ZIP PALMETTO FL 34221

TITLE D ☐ Delete  
NAME COLE, TINA A  
STREET ADDRESS 4804 U.S HWY 19  
CITY-ST-ZIP PALMETTO FL 34221

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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, when all other like empowered.

SIGNATURE:

GLEN C. COLE - PRESIDENT

9/11/00 941-739-9742

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)