

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0112274 AV

DOCUMENT # P99000046372

1. Entity Name
CREATIVE FINANCIAL, INC.



FILED
03 OCT 17 PM 3:20

Principal Place of Business
**24314 PAINTER DRIVE
LAND O LAKES FL 34639**

Mailing Address
**24314 PAINTER DRIVE
LAND O LAKES FL 34639**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



REINSTATEMENT 03
☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

4. FEI Number **59-3579504**
Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**BROWN, GUY E
24314 PAWTER DR
LAND O LAKES FL 34639**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Guy E Brown* **Guy E Brown** 10/11/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD BROWN, GUY E 24314 PAINTER DRIVE LAND O LAKES FL 34639	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Guy E Brown* **Guy E Brown** 10/11/03 813-948-6373
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/03)

Oct. 11, 03

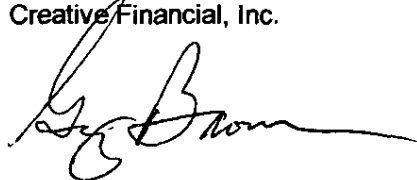
State of Florida, Department of State

I received a notice of Administrative Dissolution or Revocation of my corp.

I did not receive these notices as stated – they went to another address, the ex-registered agent.
I am enclosing the fee and signed papers for reinstatement.

Thank you

Guy Brown, President
Creative Financial, Inc.

A handwritten signature in black ink, appearing to read "Guy Brown", with a long horizontal flourish extending to the right.