

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2002 8:00 am
Secretary of State

04-30-2002 90125 007 ***150.00

DOCUMENT # P99000098881

1. Entity Name
CREART DESIGN, INC.

Principal Place of Business

**2321 LAKE DEBRA DR
APT 325
ORLANDO FL 32835**

Mailing Address

**2321 LAKE DEBRA DR
APT 325
ORLANDO FL 32835**

2. Principal Place of Business

3205 STONEHURST CIRCLE

Suite, Apt. #, etc.

3. Mailing Address

3205 STONEHURST CIRCLE

Suite, Apt. #, etc.

City & State

KISSIMEE, FLORIDA

City & State

KISSIMEE, FLORIDA

Zip

34741

Country

USA

Zip

34741

Country

USA

4. FEI Number

59-3610507

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**TOLEDO, FRANCISCO A
2309 LAKE DEBRA DR
APT 214
ORLANDO FL 32835**

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, 2002 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 **PVTS** ☐ Delete
NAME **TOLEDO, FRANCISCO A**
STREET ADDRESS **2309 LAKE DEBRA DR APT 214**
CITY-ST-ZIP **ORLANDO FL 32835**

TITLE **D** ☐ Delete
NAME **TOLEDO, FRANCISCO A**
STREET ADDRESS **2309 LAKE DEBRA DR APT 214**
CITY-ST-ZIP **ORLANDO FL 32835**

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 **PVTS** ☒ Change ☐ Addition
NAME **TOLEDO, FRANCISCO A.**
STREET ADDRESS **6530 METROWEST BLVD. APT. 627**
CITY-ST-ZIP **ORLANDO, FL 32835**

TITLE **D** ☒ Change ☐ Addition
NAME **TOLEDO, FRANCISCO A.**
STREET ADDRESS **6530 METROWEST BLVD APT. 627**
CITY-ST-ZIP **ORLANDO, FL 32835**

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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04.16.2002

Date

(407) 296-6826

Daytime Phone #

CR2E034 (9/01)