

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000103570

Entity Name: CUELLAR CREATIVE INC.

**FILED**  
**Apr 11, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

208 WHITTIER CIRCLE  
ORLANDO, FL 32806 US

**New Principal Place of Business:**

149 SHADOW TRAIL  
LONGWOOD, FL 32750 US

**Current Mailing Address:**

149 SHADOW TRAIL  
LONGWOOD, FL 32750 US

**New Mailing Address:**

FEI Number: 59-3611244      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CUELLAR, CHERYL W PRES  
149 SHADOW TRAIL  
LONGWOOD, FL 32750 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: CUELLAR, CHERYL W PRES  
Address: 149 SHADOW TRAIL  
City-St-Zip: LONGWOOD, FL 32750 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: CHERYL CUELLAR

PRES

04/11/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date