2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED Apr 23, 2001 8:00 am Secretary of State DOCUMENT # P99000107801 21ST CENTURY CREATIVE CONSULTING, INC. 04-23-2001 90164 029 ***150.00 Mailing Address Principal Place of Business 690 NORTHEAST 30 PLACE 690 NORTHEAST 30 PLACE F0033522 BOCA RATON FL 33431-6947 BOCA RATON FL 33431-6947 3. Mailing Address 6315 CAPSTAN COURT 2. Principal Place of Business 6315 CAPSTAN COURT DO NOT WRITE IN THIS SPACE City & State Applied For ROCKLEOGE, FL 32955-5765 65-0966178 Not Applicable \$8.75 Additional U.SA-6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent COLEMAN, ANTHONY G JR 690 NORTHEAST 30 PLACE BOCA RATON FL 33431-6947 ROCKLEDGE 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 (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. П Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Delete TITLE ☐ Addition CR2E034 (10/00 TITLE KENYON, ROCHELLE 6315 CAPSTAN COURT ROCKLEDGE, FL. 32955-5765 KENYON, ROCHELLE NAME NAME STREET ADDRESS STREET ADDRESS 690 NORTHEAST 30 PLACE CITY-ST-ZIP CITY-ST-ZIE **BOCA RATON FL 33431-6947** TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Defete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZiP Change ☐ Delete TITLE ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.