## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED May 27, 2008 08:00 AN Secretary of State

ANNUAL REPORT							
DOCUMENT # 1. Entity Name RAB CREATIVE FLO		58819	e gards				
Principal Place of Business		Mailing Address		1			
1266 TATE SCHOOL RD. CANTONMENT, FL 32533	US	1266 TATE SC Cantonment,		US			



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6. Name and Address of Current Registered Agent

05192008 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For

03-0591613 Not Applicable

5. Certificate of Status Desired See Required Fee Required

BROWN, ROLAND A 1266 TATE SCHOOL RD. CANTONMENT, FL 32533

SIGNATURE:

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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  SIGNATURE  Role 1  Role 2  Role 3  Role 4  Role 3  Role 4  R								
Signature, typed or finited name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating)  DATE								
FILE NOW!!! FEE IS \$150.00  Due by September 12, 2008  9. Election Campaign Finantity Trust Fund Contribution.			\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.				
10.	OFFICERS AND DIRE	CTORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P. BROWN, ROLAND A 1266 TATE SCHOOL RD. CANTONMENT, FL 32533				U00000952069 06/04/08-80065-002 150.00			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ESCUE, LEWIS D 8201 CHIQUITA DR. PENSACOLA,, FL 32534							
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE			
TITLE NAME STREET ADDRESS CITY-SI-ZIP				IN '	THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			]	,				
TITLE NAME STREET ADDRESS CITY-SI-ZIP								
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.								

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR