## NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

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May (	01, 20	02	8:00	aı
Secr	etáry	of	State	<b>e</b>

DOCUMENT # 702723 1. Entity Name 05-01-2002 91565 031 \*\*\*\*61.25 CRYSTAL COURT #1, INC DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 3. Mailing Address 2514-2516 HAYES 2516 HAYES ST. Suite, Apt. #, etc Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE APT. 9 City & State City & State 4. FEI Number Applied For <u>HOLLYWOOD</u> HOLLYWOOD 59 1161591 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 33020 3302O USA USA 7. Name and Address of Current Registered Agent LEVAY ANTON DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE APT, 9 HAYES ST. Zip Code 33020 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 nt and title if applicable. (NOTE: Registered Agent signature required when reinstating) FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Initial or Amended UBR Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS P TITLE CR2E037B (12/01) NAME ANTON LEVAY 2516 HAYES ST., APT. 9 NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33020 TITLE NAME VERONIKA KOVACS 8516 HAYES ST. APT. 10 NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD, FL 33020 T AND S TITLE NAME LENKE LEVAY NAME STREET ADDRESS STREET ADDRESS 2516- HAYES ST. , API 9 DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD, FL 33020 TITLE TITLE IN THIS SPACE ANTON LEVAY 0516 HAYES ST. APT 9 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HOLLYWOD, FL 33020 TITLE TITLE NAME DOROTHY MALEC NAME STREET ADDRESS STREET ADDRESS 2514 HAYES ST. APTO CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33020 TITLE OLGA SIMO TITLE NAME NAME 2516 HAYES ST. APT 8 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HOLLY WOOD FL 33020

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 617, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

(ANTON LEVAY

4-17-02