FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 AM 10:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 725122 (6)

1. Corporation Name
CRYSTAL HOUSE, INC.

Principal Place of Business
5055 COLLINS AVENUE
MIAMI BEACH FL 33140

Mailing Address
5055 COLLINS AVENUE
MIAMI BEACH FL 33140

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/20/1972
3a. Date of Last Report: 03/21/1994
4. FEI Number: 59-1460459 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip
24
Country
25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip
29
Country
30

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. *This corporation has liability for intangible tax under S. 199.032, Florida Statutes* ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

VAN HOUTEN, DRUCELLA P.
5055 COLLINS AVENUE
MIAMI BEACH FL 33140

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE ____________________
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	PALMER, JACQUES
STREET ADDRESS	5055 COLLINS AVE
CITY-ST-ZIP	MIAMI BCH FL
TITLE	VP
NAME	MONTELLO, LOUIS R.
STREET ADDRESS	5055 COLLINS AVE
CITY-ST-ZIP	MIAMI BCH FL
TITLE	S
NAME	DANZIS, SIDNEY
STREET ADDRESS	5055 COLLINS AVE
CITY-ST-ZIP	MIAMI BCH FL
TITLE	T
NAME	TROPP, STEPHEN
STREET ADDRESS	5055 COLLINS AVE
CITY-ST-ZIP	MIAMI BCH FL
TITLE	D
NAME	BANK, RUTH M.
STREET ADDRESS	5055 COLLINS AVE
CITY-ST-ZIP	MIAMI BCH FL
TITLE	D
NAME	WILDY, BRENDA
STREET ADDRESS	5055 COLLINS AVENUE
CITY-ST-ZIP	MIAMI BCH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 1 TITLE	President D T	☒ Change ☐ Addition
1 2 NAME	Shara L. Stock	
1 3 STREET ADDRESS	5055 Collins Ave	
1 4 CITY-ST-ZIP	Miami Beach, Florida 33140	
2 1 TITLE	Vice President	☒ Change ☐ Addition
2 2 NAME	Ruth M. Bank	
2 3 STREET ADDRESS	5055 Collins Ave	
2 4 CITY-ST-ZIP	Miami Beach, Florida 33140	
3 1 TITLE	Vice President	☒ Change ☐ Addition
3 2 NAME	George Adlman	
3 3 STREET ADDRESS	5055 Collins Avenue	
3 4 CITY-ST-ZIP	Miami Beach, Florida 33140	
4 1 TITLE	Treasurer D T	☒ Change ☐ Addition
4 2 NAME	N. Allan Steinman	
4 3 STREET ADDRESS	5055 Collins Avenue	
4 4 CITY-ST-ZIP	Miami Beach, Florida 33140	
5 1 TITLE	Secretary D T	☒ Change ☐ Addition
5 2 NAME	Harold Wolper	
5 3 STREET ADDRESS	5055 Collins Avenue	
5 4 CITY-ST-ZIP	Miami Beach, Florida 33140	
6 1 TITLE		☐ Change ☐ Addition
6 2 NAME		
6 3 STREET ADDRESS		
6 4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Shara L. Stock 4/19/95 865-5776
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
SHARA L. STOCK PRESIDENT

004142