2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2009
Secretary of State

DOCUMENT# 725122

Entity Name: CRYSTAL HOUSE, INC.

Current Principal Place of Business:

5055 COLLINS AVENUE
MIAMI BEACH, FL 33140

New Principal Place of Business:

Current Mailing Address:

5055 COLLINS AVENUE
MIAMI BEACH, FL 33140

New Mailing Address:

FEI Number: 59-1460459 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WISE, JOSE
5055 COLLINS AVE
MIAMI BEACH, FL 33140 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: P ( ) Delete
Name: WISE, JOSE
Address: 5055 COLLINS AVE #3F
City-St-Zip: MIAMI BEACH, FL 33140

Title: VP ( ) Delete
Name: ESPINOSA, JOSE
Address: 5055 COLLINS AVE, # 2H
City-St-Zip: MIAMI BEACH, FL 33140

Title: S ( ) Delete
Name: COETZEE, BRENT
Address: 5055 COLLINS AVE #11M
City-St-Zip: MIAMI BEACH, FL 33140

Title: TRES ( ) Delete
Name: ABRANTE, JOSE
Address: 5055 COLLINS AVE #11C
City-St-Zip: MIAMI BCH, FL 33140

Title: D ( ) Delete
Name: STERNHELL, JOSHUA
Address: 5055 COLLINS AVE
City-St-Zip: MIAMI BCH, FL 33140

Title: D ( ) Delete
Name: BUSTAMANTE, JAVIER
Address: 5055 COLLINS AVE #4G
City-St-Zip: MIAMI BEACH, FL 33140

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSE ESPINOSA VP 03/11/2009
Electronic Signature of Signing Officer or Director — Date