

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008622

FILED
Jul 14, 2006
Secretary of State

Entity Name: CRYSTAL PARROT PLAYERS, INC.

Current Principal Place of Business:

6501 SW 62ND CT
MIAMI, FL 33143

New Principal Place of Business:

Current Mailing Address:

P O BOX 370386
MIAMI, FL 33137

New Mailing Address:

FEI Number: 65-1261027 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

NEFF, TRAVIS
452 NE 30TH ST
MIAMI, FL 33137 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: PT () Delete
Name: NEFF, TRAVIS
Address: 452 NE 30TH ST
City-St-Zip: MIAMI, FL 33137

Title: VS () Delete
Name: RILEY, SANDRA
Address: 6501 SW 62ND CT
City-St-Zip: MIAMI, FL 33143

Title: D (X) Delete
Name: BLACK, LUISA
Address: 3016 SEMINOLE ST
City-St-Zip: COCONUT GROVE, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ED (X) Change () Addition
Name: NEFF, TRAVIS
Address: 452 NE 30TH ST
City-St-Zip: MIAMI, FL 33137

Title: AD (X) Change () Addition
Name: RILEY, SANDRA
Address: 6501 SW 62ND CT
City-St-Zip: MIAMI, FL 33143

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

I hereby certify that the information supplied with this filing does not qualify for the 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: TRAVIS NEFF

ED

07/14/2006

Electronic Signature of Signing Officer or Director

Date