2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Mar 29, 2004 8:00 am **Secretary of State** DOCUMENT # N95000004564 1. Entity Name 03-29-2004 90086 026 ****61.25 CRAWFORD CENTER, INC. Principal Place of Business Mailing Address 3521 W. BROWARD BLVD 3521 W. BROWARD BLVD 3RD FLOOR **リオリリリかんり** 3RD FLOOR FT. LAUDERDALE FL 33312 FT. LAUDERDALE FL 33312 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (11/03) MOORE Applied For City & State City & State 4. FEI Number 65-0610247 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MENENDEZ, MANUEL Street Address (P.O. Box Number is Not Acceptable) 3521 WEST BROWARD BLVD **STE 300** FORT LAUDERDALE FL 33312 City Zio Code 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Florida Department of State Added to Fees Due By May 1, 2004 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ☐ Detete TITLE ☐ Change ☐ Addition TITLE MENENDEZ, MANUEL NAME NAME 8780 SW 122ND ST STREET ADDRESS STREET ADDRESS MIAMI FL 33176 CITY-ST-7IP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE MYRTETUS, PETER NAME NAME 2828 CORAL WAY PATHS 2 STREET ADDRESS STREET ADDRESS MIAMI FL 33145 CITY-ST-7IP CITY-ST-7IP ☐ Addition Delete Change TITLE TITS F TEASDALE, RON NAME 6620 SW 77 TERR STREET ADDRESS STREET ADDRESS MIAMI FL 33143 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change Addition TITLE SUAREZ, CARLOS MD NAME 724 ALHAMBRA CIR STREET ADDRESS STREET ADDRESS **CORAL GABLES FL 33134** CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE LOPEZ, RICHARD NAME NAME 5831 NW 33 AVE STE 105 STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33309 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE BICHARRA, BLANCA NAME 2277 NW 82 AVENUE STREET ADDRESS STREET ADDRESS MIAMI FL 33122 CITY, ST-ZIP CITY-ST-7IP 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 partier \$17. Florida Statutes; and that my name appears in Block 10 or Block 11 if

FILED

ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

of the corporation or the receiver or trustee empowered to e

SIGNATURE: