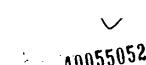
FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

DOCUMENT # P91600007370 1. Entity Name

CRYSTAL FANTASIES, INC.



FILED Apr 20, 2006 8:00 am Secretary of State 04-20-2006 90193 025 ***150.00



	OO NOT WRITE	IN THIS		40055052		
2. Principal Pl	ace of Business	3. Mailing Address	s			40,000
	Sunset Dr.	1	unset	Dr.		
Suite, Apt.		Suite, Apt. #, etc				CR2E034B (8/05)
	FL 33774-4812	Largo,	FI 337	74-481	2	<u></u>
City & State)	City & State		/	4.	FEI Number Applied For
						59 - 3356926 Not Applicable
Zip	Country	Zip	Cour	•	,	Certificate of Status Desired \$8.75 Additional Fee Required
- 33774-	4812 Pinellas	! 33774-4	 8 2' 	ine Ha	S 7. N	lame and Address of Current Registered Agent
				Name	Dick	ey, William R
	DO_NOT_W	RITE		Ch + 0		
				Street Add	aress IP.O	Box Number is Not Acceptable)
. •	IN THIS SF	PACE			2310	W Bay Dr
			ī	City		FL Zip Code
*	· .				_Larg	34640
	named entity submits this statement to ions of registered agent.	r the purpose of chan	iging its register	rea office or r	egistered a	gent, or both, in the State of Florida. I am familiar with, and accept
the obligati	ions of registered agent.					
OLONIA TURE						
SIGNATURE .	Signature, typed or printed name of registered agent	and title if applicable.	(NOTE Register	ed Agent signature	e required when	reinstating) DATE
Jar	nuary 1 - May 1 Fee is \$150.00	•				A Florition Comparing Financing 65.00
	After May 1, Fee is \$550.00 Amended AR is \$61.25					9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees
Make Check	Payable to Florida Department of	State				Added to 7 993
10.	OFFICERS AND					
TITLE			T‡T)	LE		
NAME	SD		NAI	viE		
STREET ADDRESS	SMITH, WELMA J	•	STR	LEET ADDRESS		ļ
CITY-ST-ZIP	14643 Sunset D	r.	CIT	Y-ST-ZiP		
TITLE	Largo, FL, 337	74-4812	TITI	LE		
NAME	P		NAI	ME		
STREET ADDRESS	•		STF	REET ADDRESS	,	
CITY-ST-ZIP	SMITH, RANDAL I	-	CIT	Y-ST-ZIP		
	14643 Sunset D	r. Largo,	,— - <u> </u>			
TITLE NAME	,	3377	74-48 21TI			
STREET ADDRESS				HEET ADDRESS		
CITY-SI-ZIP			1	Y-ST-ZIP		DO NOT WRITE
		****	TIT			
TITLE			NAI	į.		IN THIS SPACE
NAME				REET ADDRESS	•	
STREET ADDRESS CITY-ST-ZIP				Y-SI-ZIP		
TITLE			TIT	ME		
NAME				REET ADDRESS		
STREET ADDRESS	}			Y-ST-ZIP		
CITY-ST-ZIP						
TITLE			मा			
NAME				ME		
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP	<u> </u>	 .		Y-ST-ZIP		
12. I hereby	certify that the information supplied with	n this filing does not q	ualify for the ex	emption state	ed in Section	on 119.07(3)(i), Florida Statutes. I further certify that the information the legal effect as if made under oath; that I am an officer or director

indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as in made thick during that rain and officer 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: _

CUMENT # (NOTIFIED THE PROPERTY NAME OF THE PROPER	P9600	SS REPORT 0007370					θ		
ipat Place of Business 43 SUNSET DR IGO FL 33774-4812		Mading Address 14843 SUNSET DR LARGO FL 33774 US	, ·			405	67) F	52	
		3. Mailing Address				Tur			
rincipal Place of Business		Suite, Apt. #, etc				CHECK HER	E IF MAKING	CHANGES	
Suite, Apt. #. etc.					4. FEI N	umber 59-33569	26	I.———	sed For Applicabl
Dity & State		City & State	T					\$8.75 Additi	
Zip	Country	Zip	Country			icale of Status Desired and Address of Nev		Fee Required Agent	
6. Name and	d Address of Curren	t Registered Agent	Nam	ne	7. Nam	e and Add			
DICKEY, WILLIAM R			Stree	Street Address		lumber is Not Accepta	ible)		
2310 W BAY DR									
LARGO FL 34640	, , , , ,		City	 -			FL	Zip Gode	
2*	WWW 2	411312,04				or both in the State C	f Florida. Tam	i familiar with, a	ind acce
The above named entity since obligations of registered			its registered offic OTL Registered Agoni			ating)	DATE		
The above named entity strike obligations of registers GNATURE Signature, typned or FILE NOW!!!	printed name of registered an	est and that diapplicable (N			ted when minst	9. Election Campaig Trust Fund Contri	pare gn Financing bution.	\$5.0	0 May E
The above named entity strike obligations of registers GNATURE Signature, typned or	printed name of registered are FEE IS \$150.00. Fee will be \$550.0 Florida Departmen	out and the diapplicable (N 00 t of State) ND DIRECTORS	OTL Registered Agent		ted when minst	9. Election Campaig	pare gn Financing bution.	\$5.0	0 May E
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SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR