## **2005 FOR PROFIT CORPORATION**

## **FILED AM**

ANNUAL REPORT			_ Apr 04, 2005 08:00
DOCUMENT # 404605  1. Entity Name CRISTINA PROPERTIES, INC.			Secretary of Stat
Principal Place of Business Mailing Address 2300 CORAL WAY 2300 CORAL WAY SUITE 200 SUITE 200 MIAMI, FL 33145 MIAMI, FL 33145			
DO NOT WRITE IN THIS SPACE		01072005 No Chg-P	
5. Name and Address of Current Registere FLORIDA ANNUAL REPORT SERVICES INC 2300 CORAL WAY SUITE 200 MIAMI, FL 33145	d Agent	. <del>-</del>	DO NOT WRITE IN THIS SPACE
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  Signature, typed Operationalize of registered agent and fire if approache.  (NOTE: Registered Agent signature required when reinstating)  DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	Election Campaign Financ Trust Fund Contribution.		5.00 May Be ided to Fees
10. OFFICERS AND DIRECTOR  TITLE PD NAME FERNANDEZ, JOSE R STREET ADDRESS 943 W. FLAGLER STREET CITY-ST-ZIP MIAMI, FL  TITLE SD NAME FERNANDEZ, ALBERTO STREET ADDRESS 943 W. FLAGLER STREET CITY-ST-ZIP MIAMI, FL  TITLE VD NAME FERNANDEZ, JOSE R.	RS		U00000288015 04/04/05-80092-015 150.00
STREET ADDRESS CITY-ST-ZIP MIAMI, FL  TITLE TO NAME FERNANDEZ, JORGE LUIS STREET ADDRESS GITY-ST-ZIP MIAMI, FL  TO MIAMI, FL			DO NOT WRITE IN THIS SPACE
TITLE STREET ADDRESS CITY-ST-ZIP TITLE			
NAME STREET ADDRESS CITY-ST-ZIP	does not qualify for the array	ontion stated in Co	Parties 119 (7/3/6) Elorida Statutae Liuther cartifu that the information
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 Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 2/1/CO SIGNATURE AND TYPES OF PRINTIED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Daytome Phone &			

ALBERTO FERNANDEZ, SECRETARY