

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V66887

Entity Name: CRYSTAL INN CO.**Current Principal Place of Business:**3850 BIRD ROAD - SUITE 302
MIAMI, FL 33146**Current Mailing Address:**3850 BIRD ROAD - SUITE 302
MIAMI, FL 33146 US**FEI Number:** 65-0361911**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324 US*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**Officer/Director Detail :**

Title D
Name CORBEDDU, ANTONIO
Address 3850 BIRD ROAD
SUITE 302
City-State-Zip: MIAMI FL 33146

Title DIRECTOR
Name MICANGELI, MAURIZIO
Address 3850 BIRD ROAD
SUITE 302
City-State-Zip: MIAMI FL 33146

Title PD
Name TUPINI, CLAUDIO
Address 3850 BIRD ROAD
SUITE 302
City-State-Zip: MIAMI FL 33146

Title D
Name LAROCHE, RICHARD FJR
Address 2103 SHANNON DR,
City-State-Zip: MURFREESBORO TN 37129

Title D
Name FRIEDBAUER, ROGER
Address 701 BRICKELL AVE STE 2525
City-State-Zip: MIAMI FL 33131

Title DIRECTOR
Name MICANGELI, MARCO
Address 3850 BIRD ROAD - SUITE 302
City-State-Zip: MIAMI FL 33146

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CLAUDIO TUPINI

D

02/13/2017

Electronic Signature of Signing Officer/Director Detail_____
Date