

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2008 8:00 am
Secretary of State

01-11-2008 90032 049 ***150.00

DOCUMENT # 195840

1. Entity Name
CROSS REALTY CORP.



Principal Place of Business
7942 FERNDAL BEND DR
LAKE WORTH, FL 33467 US

Mailing Address
7942 FERNDAL BEND DR
LAKE WORTH, FL 33467 US

40000000



01042008 Chg-P CR2E034 (12/06)

4. FEI Number
59-0794592

Applied For
Not Applied

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JOEL CROSS
7942 FERNDAL BEND DR
LAKE WORTH, FL 33467

Name

Street Address (P.O. Box Number is Not Acceptable)

7942

City

FL

Zip 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete
NAME JOEL CROSS
STREET ADDRESS 7942 FERNDAL BEND DR
CITY-ST-ZIP LAKE WORTH, FL 33467

TITLE ☐ Change ☐ Ad
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☐ Delete
NAME MICHAEL CROSS
STREET ADDRESS 4378 N DIXIE HWY
CITY-ST-ZIP OAKLAND PARK, FL 33334

TITLE ☐ Change ☐ Ad
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

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CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Joel Cross President

1/6/2008