

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 06, 2006 08:00 AM
Secretary of State

DOCUMENT # 342648

1. Entity Name
CROWN DEVELOPMENT OF FLORIDA CORP.



Principal Place of Business
**2045 NW 201 TER
NORTH MIAMI BEACH, FL 33179 US**

Mailing Address
**2045 NW 201 TER
NORTH MIAMI BEACH, FL 33179 US**



03302006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1266781

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**HEISLER, SALOMON
1725 N.E. 170TH ST
N. MIAMI BEACH, FL 33162**

**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 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, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	HEISLER, SALOMON
STREET ADDRESS	1725 N.E. 170TH STREET
CITY-ST-ZIP	N. MIAMI BEACH, FL
TITLE	D
NAME	HEISLER, STEVEN
STREET ADDRESS	900 NE 195 STREETAPT. 515
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33179
TITLE	S
NAME	HEISLER FLINT, ILEANA
STREET ADDRESS	2045 NE 201 TERR
CITY-ST-ZIP	N. MIAMI BEACH, FL 33179
TITLE	VPT
NAME	HEISLER, HARRY
STREET ADDRESS	10332 SW 164 CT
CITY-ST-ZIP	MIAMI, FL 33198
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/21/06-00005-017 158.75

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IN THIS SPACE**

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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Salomon Heisler **SALOMON HEISLER**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MAR 31/2006 (305) 933 5229
Date Daytime Phone #