1 of 2

7 01-03

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED

03 APR -8 AM 9:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 567495

1. Entity Name
Crown Trading Co., Inc.

DO NOT WRITE IN THIS SPACE

2001-2003 UBR

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	145 W. Osceola Lane
City & State	City & State: Cocoa Beach, Fl. 32931
Zip / Country	Zip: 32931 / Country: USA

4. FEI Number: 59-1898940 ☐ Applied For ☐ Not Applicable

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

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7. Name and Address of Current Registered Agent

Name: Elayne Sakson

Street Address (P.O. Box Number is Not Acceptable): 145 W. Osceola Lane

City: Cocoa Beach FL Zip Code: 32931

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

January 1 - May 1, Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	Sakson, Elayne
STREET ADDRESS	145 W. Osceola Lane
CITY-ST-ZIP	Cocoa Beach, Florida 32931
TITLE	VD
NAME	Rona Sakson
STREET ADDRESS	2002 Lake Union Hill Way
CITY-ST-ZIP	Alpharetta, Ga. 30004

400018670234
05/09/03--01020--029 **450.00

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CR2E034B (12/02)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: x Elayne Sakson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

gf 415

ATTACHMENT

4/02/03

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Doc# 567495

To Whom it May Concern:

As per instructions from the Reinstatement Div. Of Corporations please find:

① A completed for profit Corp. Uniform Business Report

② Check for $45.00 to bring Crown Trading current thru 12/31/03.

I appreciate your cooperation & prompt attention to this matter.

Very truly yours

Elayne Anson
145 W. Oviedo Dr.
Cocoa Bch, Fl.
32931