

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F01000005599

Entity Name: CROWN GLOBAL INVESTMENTS, INC.

FILED
Sep 28, 2009
Secretary of State

Current Principal Place of Business:

509 MORNING PLACE WAY
SUWANEE, GA 30024

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 56128
ATLANTA, GA 30343

New Mailing Address:

FEI Number: 58-2362397

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALIDINA, ABDULREHMAN
1862 TAMiami TRAIL NORTH
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

ALIDINA, ABDULREHMAN
5101 BLUE LAGOON DRIVE
MIAMI, FL 33126 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: ABDUL REHMAN ALIDINA

09/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCSV () Delete
Name: ALIDINA, AMYN
Address: 509 MORNING PLACE WAY
City-St-Zip: SUWANEE, GA 30024 US

Title: OFFI () Delete
Name: ALIDINA, ABDULREHMAN
Address: 509 MORNING PLACE WAY
City-St-Zip: SUWANEE, GA 30024 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: OFFI () Change (X) Addition
Name: ALIDINA, AKBAR
Address: 509 MORNING PLACE WAY
City-St-Zip: SUWANEE, GA 30024 US

Title: OFFI () Change (X) Addition
Name: ALIDINA, ALMAS
Address: 509 MORNING PLACE WAY
City-St-Zip: SUWANEE, GA 30024 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ABDUL REHMAN ALIDINA

OFFI

09/28/2009

Electronic Signature of Signing Officer or Director

Date