- FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

DOCUMENT # F17477 (3) CREVILL, INC. Procept Flore of Numeror Moding Address 200 W 31 St. MALEAH R. 30010-2016		L REPORT 997	Secretary DIVISION OF CO		Secreta	ry of State
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1		Country	and the second of the second o	Country		
9. Name and Address of Current Registered Agent RGSISTREP AGENT SERVICES, CO 444 BRICKELL AVENUE SUTE 930 MIAMI FL 33131 83 44 City FL 85 Zip Code 11. Pursues to the provisions of Sections 697 (500° and 607 1508, Florida Statutes. The above-named corporation submits this statement for the purpose of changing its register office or registered agent, or both, in the State of Florida Such change was authorized by the exponsition's board of directors. I hereby accept the appointment as register office or registerial agent 1 am from with, and decept the orbigation of, Section 500° (ASS) (Florida Statutes. The above-named corporation's submits this statement for the purpose of changing its register of the or registerial agent 1 am from with and one capt the orbigation of, Section 500° (ASS) (Florida Statutes. The above-named corporation submits this statement for the purpose of changing its register of the original or accept the depointment as registerial agent 1 am from with and original or accept the edipoint on State (Florida Such change authorized by the nethidating) 500	····-ງ	fı ´	F			
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SUTTE 930 MIAMI FL 33131 183 184 City FL 85 Zip Code 111. Pursuant to the provisions of Sociolos 607 5002 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register officer or registered largest a largest and the statement for both, in the State of Florida Subch change was authorized by the corporation's board of directors. I hereby accept the appointment as register and the statement for both, in the State of Florida Statutes. SIGNATURE 12.			CO	81 Name		
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14. Log hereby certify that the information supplied with this tiling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report of supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath						
Lant an officer or director of the corporation of the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name	 I oo hereby information I am an office 	certify that the information support indicated on this annual report an or director of the corporation	plied with this filling does not qualify or supplemental annual report is tri n or trustee empower	y tor the exemption state ue and accurate and the ered to execute this rep	ed in Section 119.07(3)(i), Florida Statut at my signature shall have the same leg ort as required by Chapter 607, Florida	35. I further certify that the all effect as if made under oath; that Statutes; and that my name

SIGNATURE:

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Apr 08 1997 8:00am