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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

(2)

DOCUMENT # H87587 CRYSTAL DISPLAY CENTER, INC.

FILED Jan 31 1997 8:00am Secretary of State

	•			•								
Principal Place	e of Business	Mailing Addres	Mailing Address				1 (1111)					(18) 100
755 N.W. 72ND MIAMI FL 3312		755 N.W. 72ND (MIAM) FL 33126	755 N.W. 72ND AVE PL. 11									
						1	12/02	•	d or Qualified		ate of Last R /26/1996	eport
2. Principal P	lace of Business	2a. Mailing Add	ress			4	, FEI Nur					plied For
21		26					59-2	612151			No	t Applicable
Suite, Apt	#, etc	<u>-</u> η	Suite, Apt. #, etc.				. Certific	ate of Sta	us Desired		\$8.75	
22 City & State	<u></u>	27 City & State	City & State						- Plane dan	······		equired
23	v		28			'		i Campai; und Contr	n Financing		\$5.00 Added 1	
Zip	Country	Zip		Country		- 6			has liability fo			
24	25	29	30					Statutes			□ No	
	g, Name and Address of Cui	rent Registered Agent			Alama a	19), Name	and Addr	ess of New R	legistered	Agent	
	O, SIHAM			81	Name	Si	ha	Μ	Gho	zNO(OUR	
	NORTHWEST 72ND AVENUE			82	Street /	doress	(P.O. Box	Number i	s Not Accepte	able)	Plan	11
	ZA 11 MI FL 33126			83		,,	N.W	. /,	L - HV-	erne	TIAZA	- 17
Mirti	MI FL 33 120											
				84	City	M	an			FL	_ 85 Zip 9	2009 2121
11. Pursuant	to the provisions of Sections 607.	0502 and 607.1508, Flor	da Stalutes, th	ie above	-named	corporat	on submi	ts this sta	ement for the	purpose o	of changing It	s registered
office or r agent Fa	egistered agent, or both, in the St m familiar with, and accept the ot	ate of Florida. Such cha Digations of, Section 607	nge was authoi .0505, Florida	rized by Statutes	rthe corp ii.	oration's	board of	directors.	I hereby acc	ept the ap	pointment as	registered
SIGNATURE.												
	Signature, typed or printed name of registered				nt signature	required wh	en reinstating			DATE		
12.	PSD OFFICERS	AND DIRECTORS		13. 1.1 TITLE		V2 6	ADDITIO	NS/CHAN	IGES TO OFF	ICERS AN	D DIRECTOR Change	S IN 12 Addition
NAME	GHANDOUR, SHIHAM			1.2 NAME			21/0	70	Siha	M	grange many	
STREET ADORESS	755 NW 72ND AVE-LOBBY	11		1.3 STREET	ADDRESS	G- 911	-	,	TIME	Avec	ue Plan	za 11
CITY-ST-ZIP	MIAMI FL	••		1.4 CITY-S		13	of a	M,	FL	3	3726	
TITLE		1 🗆		2.1 TITLE	***************************************				·····		Change	Addition
NAME			2	2.2 NAME								
STREET ADDRESS				2.3 STREET	ADDRESS							
CITY - S1 - ZIP				2. 4 CITY-\$	it-zip ···	:				···	100	Addition
NAME		L., t		3.1 TITLE 3.2 NAME							L] Change	Addition
STREET ADDRESS				3.3 STREET	ADDRESS							
CITY-ST-ZIP				3.4. CITY-S								
TITLE				4.1 TITLE	,, <u>-</u> ,,,						Change	Addition
NAME				4. 2 NAME								
STREET ADDRESS			4	4.3 STREET	ADDRESS							
CITY-ST-ZIP				4.4 CITY - S	T-ZIP					····		
TITLE				5.1 TITLE							☐ Change	Addition
NAME				5.2 NAME								
STREET ADDRESS				5.3 STREET								
CITY-ST-ZIP TITLE		Πr		5.4 CITY - S' 6.1 TITLE	T-ZIP						☐ Change	☐ Addition
NAME		L. 6		6.2 NAME							- orderRo	
STREET ADDRESS				6.3 STREET	ADDRESS							
DITLE I MOUNESS			1	J.O D (NLC)	White							

14. I do 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 annual report or supplemental annual 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 12 or Block 13 it shanged, or on an attachment with an address.