

**2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)**

**FILED**  
**Feb 07, 2008 8:00 am**  
**Secretary of State**

02-07-2008 90030 045 \*\*\*150.00

DOCUMENT # J75604  
 1. Entity Name  
**CRISTEX, INC.**



Principal Place of Business Mailing Address  
 1544 MARKET CIRCLE BLDG 11 PORT CHARLOTTE FL 33953 US  
 21388 EDGEWATER DR PORT CHARLOTTE FL 33952 US



2. Principal Place of Business - No P.O. Box #  
**1544 MARKET CIR UNIT 1110**  
 Suite, Apt. #, etc.

3. Mailing Address  
**21388 EDGEWATER DR**  
 Suite, Apt. #, etc.

1st MOORE CR2E034 (10/07)

City & State  
**PORT CHARLOTTE FL**

City & State  
**PORT CHARLOTTE FL**

Zip Country  
**33953 USA**

Zip Country  
**33952 USA**

4. FEI Number **59-2826794** Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent  
**CRISTINA, JOHN**  
**21388 EDGEWATER DR**  
**PT.CHARLOTTE FL 33952**

7. Name and Address of New Registered Agent  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** Zip Code

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

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee Will Be \$550.00**  
**Make Check Payable to Florida Department of State**

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

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	CRISTINA, JOHN	
STREET ADDRESS	21388 EDGEWATER DR	
CITY-ST-ZIP	PT CHARLOTTE FL 33952	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	ST
NAME	VIRGINIA, CRISTINA
STREET ADDRESS	21388 EDGEWATER DRIVE
CITY-ST-ZIP	PT CHARLOTTE FL 33952
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**CRISTEX INC.** 08/06  
 PH. 941-624-3866  
 21388 EDGEWATER DRIVE  
 PORT CHARLOTTE, FL 33952

68-1437/670 400500251 3177  
 DATE 1-25-08

PAY TO THE ORDER OF Fl. Dept of State \$ 150.00  
One hundred fifty DOLLARS

**Busey**  
 Busey Bank, N.A.  
 www.busey.com

MEMO corp filing John Cristina

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: John Cristina **JOHN CRISTINA** 1-25-08 941-624-3866  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

40020230

# J7 5604

**CRISTEX, INC.**

John Cristina  
President  
CRC025246 \* CRC023532

1544 Market Cir; #1110, Pt. Charlotte, Fl. 33953  
Office: (941) 624-3866 \* Fax: (941) 764-5959

January 29, 2008

Fl. Department of State

I am sending a copy of the 2008 corp. annual report. I inadvertently forgot to put the check in the envelope before putting it in the mailbox.

Thank you,

Ginger Cristina  
Sec/treas.