SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/8/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 20 PM 2:42

DOCUMENT # **K95881** (4)

1. Corporation Name
CRYSTAL PALACE U.S., INC.

Principal Place of Business	Mailing Address
C/O MIKE MURRAY 2901 STIRLING ROAD, SUITE 300 FT. LAUDERDALE FL 33312	C/O MIKE MURRAY 2901 STIRLING ROAD, SUITE 300 FT. LAUDERDALE FL 33312

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

3. Date Incorporated or Qualified: **06/16/1989**
3a. Date of Last Report: **04/22/1994**
4. FEI Number: **65-0125926** ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

MURRAY, MIKE
2901 STIRLING ROAD
SUITE 300
FT. LAUDERDALE FL 33312

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Mike Murray MIKE MURRAY SR. VICE PRESIDENT DATE 6/15/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD	1 1 TITLE	P/D/T/S ☐ Change ☒ Addition
NAME	HOWARD, FRANK S	1 2 NAME	Ruffin, Phil
STREET ADDRESS	3655 N.W. 87TH AVE.	1 3 STREET ADDRESS	8450 Killarney
CITY-ST-ZIP	MIAMI FL 33178	1 4 CITY-ST-ZIP	Wichita, KS 67206
TITLE	V	2 1 TITLE	☐ Change ☒ Addition
NAME	LAKE, GARY	2 2 NAME	
STREET ADDRESS	5225 N.W. 87TH AVE	2 3 STREET ADDRESS	NONE
CITY-ST-ZIP	MIAMI FL 33178	2 4 CITY-ST-ZIP	
TITLE	D	3 1 TITLE	☐ Change ☒ Addition
NAME	WEISER, SHERWOOD	3 2 NAME	
STREET ADDRESS	3250 MARY ST.	3 3 STREET ADDRESS	NONE
CITY-ST-ZIP	MIAMI FL 33133	3 4 CITY-ST-ZIP	
TITLE	D	4 1 TITLE	☐ Change ☒ Addition
NAME	HEWITT, THOMAS	4 2 NAME	NONE
STREET ADDRESS	3250 MARY ST.	4 3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33133	4 4 CITY-ST-ZIP	
TITLE	AS	5 1 TITLE	☐ Change ☒ Addition
NAME	ADDERLEY, NEVILLE K	5 2 NAME	
STREET ADDRESS	680 EAST BAY ST.	5 3 STREET ADDRESS	NONE
CITY-ST-ZIP	NASSAU BA	5 4 CITY-ST-ZIP	
TITLE		6 1 TITLE	☐ Change ☐ Addition
NAME		6 2 NAME	
STREET ADDRESS		6 3 STREET ADDRESS	
CITY-ST-ZIP		6 4 CITY-ST-ZIP	

CR2E034 (3/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 if changed, or on an attachment with an address.

SIGNATURE: ______
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0074251 CP