

FILED

May 07 1998 8:00am  
Secretary of State

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

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| <b>PROFIT CORPORATION</b><br><b>ANNUAL REPORT</b><br><b>1998</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                           | FLORIDA DEPARTMENT OF STATE<br>Sandra M. Northam<br>Secretary of State<br>DIVISION OF CORPORATIONS                                            |                                                                                                                 |
| <b>DOCUMENT #</b> M50231<br>1. Corporation Name<br><b>CRYSTAL CRAFTS INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                           |                                                                                                                                               |                                                                                                                 |
| Principal Place of Business<br><b>1748 S.W. 13TH PLACE</b><br><b>BOCA RATON, FL. 33486</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                           | Mailing Address<br>DO NOT WRITE IN THIS SPACE                                                                                                 |                                                                                                                 |
| 2. Principal Place of Business                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 2a. Mailing Address                       | 4. FEI Number                                                                                                                                 | <input type="checkbox"/> Applied For<br><input checked="" type="checkbox"/> Not Applicable                      |
| 21 Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 26 Suite, Apt. #, etc.                    | 59-2788975                                                                                                                                    |                                                                                                                 |
| 23 City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 27 City & State                           | 8. Certificate of Status Desired                                                                                                              | <input type="checkbox"/> \$8.75 Additional Fee Required<br><input type="checkbox"/> \$5.00 May Be Added to Fees |
| 25 Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 29 Zip                                    | 9. Election Campaign Financing Trust Fund Contribution                                                                                        | <input type="checkbox"/> \$5.00 May Be Added to Fees                                                            |
| 26 Country                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 30 Country                                | 10. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.                                          | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                             |
| 9. Name and Address of Current Registered Agent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                           | 10. Name and Address of New Registered Agent                                                                                                  |                                                                                                                 |
| <b>LINDA STERRETT</b><br><b>1748 S.W. 13TH PLACE</b><br><b>BOCA RATON, FL. 33486</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                           | 81 Name<br>82 Street Address (P.O. Box Number is Not Acceptable)<br>83<br>84 City<br>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<br>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                           |                                                                                                                                               |                                                                                                                 |
| 12 OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                           | 13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12                                                                                          |                                                                                                                 |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | PRESIDENT <input type="checkbox"/> DELETE | 1.1 TITLE                                                                                                                                     | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                               |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | LINDA STERRETT                            | 1.2 NAME                                                                                                                                      |                                                                                                                 |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 1748 SW 13 PLACE                          | 1.3 STREET ADDRESS                                                                                                                            |                                                                                                                 |
| CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | BOCA RATON, FL. 33486                     | 1.4 CITY - ST - ZIP                                                                                                                           |                                                                                                                 |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | SECRETARY <input type="checkbox"/> DELETE | 2.1 TITLE                                                                                                                                     | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                               |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | LINDA STERRETT                            | 2.2 NAME                                                                                                                                      |                                                                                                                 |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 1748 S.W. 13. PLACE                       | 2.3 STREET ADDRESS                                                                                                                            |                                                                                                                 |
| CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | BOCA RATON, FL. 33486                     | 2.4 CITY - ST - ZIP                                                                                                                           |                                                                                                                 |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | TREASURER <input type="checkbox"/> DELETE | 3.1 TITLE                                                                                                                                     | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                               |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | LINDA STERRETT                            | 3.2 NAME                                                                                                                                      |                                                                                                                 |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 1748 SW 13 PLACE                          | 3.3 STREET ADDRESS                                                                                                                            |                                                                                                                 |
| CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | BOCA RATON, FL. 33486                     | 3.4 CITY - ST - ZIP                                                                                                                           |                                                                                                                 |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> DELETE           | 4.1 TITLE                                                                                                                                     | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                               |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                           | 4.2 NAME                                                                                                                                      |                                                                                                                 |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                           | 4.3 STREET ADDRESS                                                                                                                            |                                                                                                                 |
| CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                           | 4.4 CITY - ST - ZIP                                                                                                                           |                                                                                                                 |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> DELETE           | 5.1 TITLE                                                                                                                                     | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                               |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                           | 5.2 NAME                                                                                                                                      |                                                                                                                 |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                           | 5.3 STREET ADDRESS                                                                                                                            |                                                                                                                 |
| CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                           | 5.4 CITY - ST - ZIP                                                                                                                           |                                                                                                                 |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> DELETE           | 6.1 TITLE                                                                                                                                     | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                               |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                           | 6.2 NAME                                                                                                                                      |                                                                                                                 |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                           | 6.3 STREET ADDRESS                                                                                                                            |                                                                                                                 |
| CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                           | 6.4 CITY - ST - ZIP                                                                                                                           |                                                                                                                 |
| 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(b), 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. |                                           | 500002518545 <input type="checkbox"/> Change <input type="checkbox"/> Addition<br>-05/11/98--01055--026<br>***150.00<br>4/28/98 (56) 367-8997 |                                                                                                                 |
| SIGNATURE: <i>Linda Sterrett</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                           | SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR<br>Date: 4/28/98 (56) 367-8997<br>Daytime Phone #                          |                                                                                                                 |

CR2E034 (10/97)