

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **M61189** (0)

1. Corporation Name

CRYSTAL GROVE CORPORATION



Principal Place of Business

**950 S. DIXIE HIGHWAY
P.O. BOX 2001
HOLLYWOOD FL 33022**

Mailing Address

**950 S. DIXIE HIGHWAY
P.O. BOX 2001
HOLLYWOOD FL 33022**

3. Date Incorporated or Qualified
10/21/1987

3a. Date of Last Report
03/27/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number
65-0016247

Applied For
Not Applicable

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

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

23 City & State

28 City & State

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

24 Zip

25 Country

29 Zip

30 Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SHAPIRO, NOEL
950 S. DIXIE HIGHWAY
HOLLYWOOD FL 33020**

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

Signature typed or printed name of registered agent, if not the corporation

DATE (Type, Month, Day, Year) of signature

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME
D SHAPIRO, NOEL
STREET ADDRESS
950 S. DIXIE HIGHWAY
CITY-ST-ZIP
HOLLYWOOD FL

TITLE ☐ DELETE

NAME
D SHAPIRO, JAIME
STREET ADDRESS
950 S. DIXIE HIGHWAY
CITY-ST-ZIP
HOLLYWOOD FL

TITLE ☐ DELETE

NAME
D SHAPIRO, SAMUEL
STREET ADDRESS
950 S. DIXIE HIGHWAY
CITY-ST-ZIP
HOLLYWOOD FL

TITLE ☐ DELETE

NAME
D NEWMAN, JOEL
STREET ADDRESS
950 S. DIXIE HIGHWAY
CITY-ST-ZIP
HOLLYWOOD FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

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

CRYSTAL GROVE CORPORATION

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF WORKING OFFICER OR DIRECTOR

JAIME SHAPIRO DIRECTOR 4/11/96

954-920-6180

CR2E034 (12/95)