

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 09, 2000 8:00 am
Secretary of State

05-09-2000 90117 002 ***150.00

DOCUMENT # M62142

1. Entity Name

CRC HOLDINGS, INC.

Principal Place of Business

Mailing Address

**3250 MARY ST
 SUITE 500
 MIAMI FL 33133
 US**

**3250 MARY STREET
 SUITE 500
 MIAMI FL 33133-5232
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0011922

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PELTZ, ARVIN ESQ.
 3250 MARY STREET
 SUITE 500
 MIAMI FL 33133**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**DCP
 WEISER, SHERWOOD M
 3250 MARY STREET, SUITE 500
 MIAMI FL** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**DCP
 WEISER, SHERWOOD M.
 3250 MARY STREET, SUITE 500
 MIAMI, FL 33133** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**DVCA
 LEFTON, DONALD E
 3250 MARY STREET, SUITE 500
 MIAMI FL** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**DVCAS
 LEFTON, DONALD E.
 3250 MARY STREET, SUITE 500
 MIAMI FL 33133** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**VPST
 TEMLING, W PETER
 3250 MARY STREET, SUITE 500
 MIAMI FL** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**VPST
 TEMLING, W. PETER
 3250 MARY STREET, SUITE 500
 MIAMI FL 33133** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**VAS
 HEWITT, THOMAS F
 3250 MARY STREET, SUITE 500
 MIAMI FL** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**VAS
 HEWITT, THOMAS F.
 3250 MARY STREET., SUITE 500
 MIAMI FL 33133** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**VPAS
 SIBLEY, PETER L
 3250 MARY STREET, SUITE 500
 MIAMI FL** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**VPAS
 SIBLEY, PETER L.
 3250 MARY STREET, SUITE 500
 MIAMI FL 33133** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**VPAS
 STURGES, ROBERT B
 3250 MARY STREET, SUITE 500
 MIAMI FL** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**VPAS
 STURGES, ROBERT B
 3250 MARY STREET, SUITE 500
 MIAMI, FL 33133** ☒ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WIPETER VP

Date

4/24/00 (305)445-2493

Daytime Phone #

CR2E034 (9/99)