

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 07, 2008 08:00 A
Secretary of State

DOCUMENT # N06000002705

1. Entity Name

C.S.R.E.A. OF FLORIDA, INC.



Principal Place of Business

2881 EAST OAKLAND PARK BOULEVARD
ROOM 306
FORT LAUDERDALE FL 33304
US

Mailing Address

2881 EAST OAKLAND PARK BOULEVARD
ROOM 306
FORT LAUDERDALE FL 33304
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

42-1698235

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

MORRIS, STUART R ESQ
7000 W PALMETTO PARK ROAD
SUITE 310
BOCA RATON FL 33433

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

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

(NOTE: Registered Agent signature required when reappointing)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME O'NEILL, JOHN
STREET ADDRESS 2881 EAST OAKLAND PARK BOULEVARD, ROOM 306
CITY-ST-ZIP FT. LAUDERDALE FL 33304

TITLE VPD ☐ Delete
NAME SALLES, STUART
STREET ADDRESS 2881 EAST OAKLAND PARK BOULEVARD, ROOM 306
CITY-ST-ZIP FT. LAUDERDALE FL 33304

TITLE STD ☐ Delete
NAME KJELLBERG, KJELL
STREET ADDRESS 2881 EAST OAKLAND PARK BOULEVARD, ROOM 306
CITY-ST-ZIP FT. LAUDERDALE FL 33304

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 000000885967
CITY-ST-ZIP 04/18/08-80036-003 61.25

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 617, 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:

Kjell Kjellberg Kjell Kjellberg

4/4/08 954-315-1753