2004 NOT-FOR-PROFIT CORPORATION

SIGNATURE: ROLL A Charles
SIGNATURE AND TYPED OR PRINTED MANE OF SIGNING OFFICER OR DIRECTOR

2004 NOT-FOR-PROFIT CORPORATION AND VALUE REPORT (AR)									05-05-2004 90220 026 *****66:25 N96000003153						
DOCU 1. Entity Nam CHRISTIA							ILE	D							
INC.			THE STATE OF		.01	+ MOA	29.	PM (4: 18						
Principal Place of Business 1900 N.W. 6TH AVENUE POMPANO BEACH FL 33060			1900 N	Mailing Address 1900 N.W. 6TH AVENUE POMPANO BEACH FL 33060			0	JA?	SI TA	ECRET. LLAIN	ary c Stee	if ist FLC	ATE)RIDA		
2. Principal Place of Business 500 (N.W · 15**) Suite, Apt. #, etc.			50	3. Mailing Address 500 N.W. 15 th Ct. Suite, Apt. 4. etc.				RE	NS.	ap A	iiii Em		11/03/	 	
Pam Dana B. 41				Pomoanes E			B. Fl.		4. FEI Number 65-0748314				Applied For Not Applicable		
Zip 7 3316		Broward	330			intry Wars	L	5. Certifica	te of State	us Desired			.75 Add Required	itional	
	6. Nam	and Address of Curr	ent Registered	Agent	-	Name		7. Name ar	nd Addre	as of New	Registe	red Age	nt		
190		BERT TH AVENUE BEACH FL 33060		Street A	ddress (P.O. Box Num	ber is No	t Acceptat	ole)						
						City						FL	Zip Code	<u> </u>	
		ty submits this statemer itered agent.	nt for the purpos	se of changing its	registere	ed office or	register	red agent, or b	ooth, in th	e State of I	Florida. I	am fam	iliar with.	and accept	
SIGNATURE	Robert A Charles														
į.	FILE NOV	or printed name of registered a V: FEE IS \$61,25 y May 1, 2004		9. Election Car Trust Fund (mpaign F	inancing		\$5.00 May Added to Fee	Be k		lake Ch		ayable ent of S		
-10.	1Ph 3/7	OFFICERS AND	DIRECTORS		11,		/	ADDITIONS/C	HANGES	TO OFFIC	ERS AN				
TITLE NAME	CLARKE,	ROBERT		☐ Delete	TITLI NAM	i i	i	****] Change	☐ Addition	
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CHY-ST-ZP		DBEACH FL-\$3060-				ST-ZIP	70	mpan	6 Bei	ich :	И. э	306	<i>`</i>		
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STREET ADDRESS CITY-ST-ZIP	Po	mpano Be	on, cl	33060	CITY	-ST-ZIP									
NAME TO STREET ADDRESS CITY-ST-ZIP	Id.	ula al	alker	Delete] Change	Addition	
12. Thereby of indicated of the cor	certify that the control on this reportion or the control on the c	ne information supplied or or suppliemental reprishe receiver or trustee elachment with an address.	with this filing d ort is true and a impowered to e	ccurate and that xecute this report	r the exe my signa as requi	mption stature shall h	ave the	same legal ef	fect as if r	nade unde	er oath; th	at Lam	an officer	or director	