2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000038897

Title:

Name:

Address:

City-St-Zip:

FILED Jan 12, 2004 Secretary of State

Entity Nam	ne: CRISTAL	HOLDINGS, INC.				
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
5715 WEST 20 AVE HIALEAH, FL 33012			102	15221 SW 80 STREET 102 MIAMI, FL 33193		
Current Mailing Address:			New Mailir	New Mailing Address:		
4890 PINE I MIAMI, FL						
FEI Number:	65-1003859	FEI Number Applied For()	FEI Number Not Appli	cable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
6333 SUNS	S, EDE, PETER	RSON & LAGE, L.L.C. 3 US				
The above in the State		submits this statement for the pur	rpose of changing it	s registered o	ffice or registered agent, or both,	
SIGNATUR						
	Electron	ic Signature of Registered Agent	t	Date		
Election Cam	paign Financing	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () SANCHEZ, ALV 4890 SW 85TH MIAMI, FL 3314	ST	Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	D () SANCHEZ, BLA 4890 SW 85TH MIAMI, FL 3314	ST	Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	D () SANCHEZ, CRI: 418 ARAGON A MIAMI, FL 3314	VE	Title: Name: Address: City-St-Zip:	D (X) SANCHEZ, CHR 4779 COLLINS MIAMI BEACH,	AVENUE, #908	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: CHRISTINE SANCHEZ D 01/12/2004

() Delete

SANCHEZ, ALVARO JR

4890 PINE DR

MIAMI, FL 33143

() Change () Addition