

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 21, 2005 8:00 am
Secretary of State

02-21-2005 90162 001 ***300.00

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1. Entity Name
CRISTAL HOLDINGS, INC.



Principal Place of Business

**15221 SW 80 STREET
102
MIAMI, FL 33193**

Mailing Address

**4890 PINE DR
MIAMI, FL 33143**

66002370



02142005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1003859

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**SALAS, RAUL E
C/O SALAS, EDE, PETERSON & LAGE, L.L.C.
6333 SUNSET BLVD
SOUTH MIAMI, FL 33143**

**DO NOT WRITE
IN THIS SPACE**

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 reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	SANCHEZ, ALVARO
STREET ADDRESS	4890 SW 85TH ST
CITY-ST-ZIP	MIAMI, FL 33143
TITLE	D
NAME	SANCHEZ, BLANCA
STREET ADDRESS	4890 SW 85TH ST
CITY-ST-ZIP	MIAMI, FL 33143
TITLE	D
NAME	SANCHEZ, CHRISTINE
STREET ADDRESS	4779 COLLINS AVENUE, #908
CITY-ST-ZIP	MIAMI BEACH, FL 33140
TITLE	D
NAME	SANCHEZ, ALVARO JR
STREET ADDRESS	4890 PINE DR
CITY-ST-ZIP	MIAMI, FL 33143
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Alvaro Sanchez, D
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/16/05 305-217-9959
Date Daytime Phone #