## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 24, 2004 8:00 am Secretary of State

DOCUMENT # P00000047871  1. Entity Name CRALEX, INC.						03-0	09-2004 90052 037 ***	*150.00
Principal Place of Business 9765 RIVERSIDE DR CORAL SPRINGS, FL 33071			Mailing Address 9765 RIVERSIDE DR CORAL SPRINGS, FL 33071		66407601			
2. Principal P			3. Mailing Address					
370 NW 115 (Min.) Suite, Apt. #, etc.			Suite, Apt. #, etc.		02242004 Chg-P	CR2E034 (10/03)		
Consus Spaces FC			City & State Conse Sparwers FC		<del>-</del>	4. FEI Number 65-1007657	Not A	led For Applicable
Zip 33071		Country USA	<sup>Ze</sup> 33071	Count	ບິ່ນາ	5. Certificate of Status De	Fee Required	onal
8. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent			
ROSENBE	RG MAL	COLM			100(100)			
-9765 RIVERSIDE DR CORAL SPRINGS, FL 33071					Street Address (P.O. Box Number is Not Acceptable) 370 NW IIS WAY			
					City Corat Spacules FL Zip Gode 71			
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 20 alcolm Rosenburg 3/14/0.4 Signature, typed or pretted name of registered equipment late a explicable. (NOTE: Registered Agent signature required when remastering) CATE								
FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution.								
10.		OFFICERS AND	DIRECTORS	11.		ADDITIONS (CHANGES Y	O OFFICERO AND DISPOSED	- (11
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		e information supplied wil	b this filling does not awake to		ST-ZIP	ntine 110 07/21/2 Florid - Co	ntiton I factory and the state of	
12. I hereby certify that the information supplied with this filling 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 cath; 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: Malcolin Rosenberg 3/14/04 954-753-5915								