

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

DOCUMENT # P00000106963

02 JUL -2 AM 9:57

1. Entity Name

CROWN 21 INVESTMENTS, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

849 TANGLEWOOD CIR.

3. Mailing Address

849 TANGLEWOOD CIR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

WESTON, FL.

City & State

WESTON, FL.

4. FEI Number

65-1058335

Applied For

Not Applicable

Zip

33327

Country

USA

Zip

33327

Country

USA

5. Certificate of Status Desired

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

LUIS CORONA

Street Address (P.O. Box Number is Not Acceptable)

849 TANGLEWOOD CIRCLE

City

WESTON

FL

Zip Code

33327

**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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

LUIS CORONA

6/12/02

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
	P LUIS CORONA	849 TANGLEWOOD CIRCLE	WESTON, FL. 33327				
	V HAIR PARRA	17363 SW 19TH ST	MIRAMAR, FL. 33029				
	S ROMAN BETANCOURT	905 NANDINA DR.	WESTON, FL. 33327				
	T MAIGUALIDA M. DEBETANCOURT	905 NANDINA DR.	WESTON, FL. 33327				
	D MIRIAH MORALES	905 NANDINA DR.	WESTON, FL. 33327				
	D FELIPE CORONA	17110 SW 36TH COURT	MIRAMAR, FL. 33027				

**DO NOT WRITE
IN THIS SPACE**

13. 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 11 or on an attachment with an address, with or without other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LUIS CORONA

Date

Daytime Phone #

6/12/02

CR2E0348 (12/01)

7/18/02