

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

FILED
Apr 09, 2002 8:00 am
Secretary of State

04-09-2002 90732 013 ***150.00

DOCUMENT # P01000057873

1. Entity Name

CRYSTAL CLASSES, INC

DO NOT WRITE IN THIS SPACE

80061531

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

12472 Lake Underhill Rd.

3. Mailing Address

12472 Lake Underhill Rd.

Suite, Apt. #, etc.

#318

Suite, Apt. #, etc.

#318

City & State

Orlando, FL

City & State

Orlando, FL

4. FEI Number

59-3726845

Applied For

Not Applicable

Zip

32828-7144

Country

USA

Zip

32828-7144

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Samuel J. Cusumano

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

14150 Tanja King Blvd.

City

Orlando

FL

**Zip Code
32828**

**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

**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**

**President
Samuel J. Cusumano
14150 Tanja King Blvd.
Orlando, FL 32828**

**TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP**

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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 all other like empowered.

SIGNATURE:

Samuel J. Cusumano, Pres.

4-2-02

(407) 540-9496

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)