2002 UNIFORM BUSINESS REPORT (UBR)

Aug 14, 2002 8:00 am Secretary of State P01000071492 DOCUMENT # 1. Entity Name 08-14-2002 90025 037 ***150 00 CRYSTAL PLAZA MARKET & DELI, INC. Principal Place of Business Mailing Address 833 WEST SAMPLE ROAD 833 WEST SAMPLE ROAD DEERFIELD BEACH FL 33064 DEERFIELD BEACH FL 33064 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JOHN, ANITA Street Address (P.O. Box Number is Not Acceptable) 833 WEST SAMPLE ROAD **DEERFIELD BEACH FL 33064** City Zip Code 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-\$550:00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE PD ☐ Delete TITLE PD Addition NAME JOHN, ANITA John, Anta NAME 3000 NWsthterrace #126 5946 NW 21ST STREET STREET ADDRESS STREET ADDRESS LAUDERHILL FL 33313 CITY-ST-ZIP CITY-ST-ZIP Pempanobeh FL. 33064 TITLE SD ☐ Delete TITLE SD Change / Addition John, Curtis JOHN. CURTIS NAME 3000 NW 5th Terrace # 126 5946 NW 21ST STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAUDERHILL FL 33313 CITY-ST-ZIP Pompano bch. FL 33064 TITLE VD. - Delete TITLE ☐ Change Addition NAME CROOKS, NEVILLE NAME STREET ADDRESS 2251 NW 60TH TERRACE STREET ADDRESS CITY-ST-ZIP SUNRISE FL 33313 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS

13. 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 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 Block 12 if changed, or on an attachment with an address, withyall other like empowered. SIGNATURE:

CITY-ST-ZIP

CITY-ST-ZIP

FILED

CR2E034 (4/02)

Attenhment

Crystal Plaza Market &Deli 833 west sample road Deerfield Beach Fl. # 10100007197 33064

954-943-7030

Florida Department of State

Division of Corporations.

Dear Sir/Madam:

We did not receive our first Business Report, we have now received this one, we called your office, and was informed that we must submit in writing to your department, the reason we are sending in this late payment.

Thank you for understanding, in this matter.

Respectfully

Neville Crooks Mulle

Curtis John