

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 8:00 am
Secretary of State

03-18-2004 90040 023 ***150.00

DOCUMENT # P01000113756 1. Entity Name CRIST. ALTERATION, CORP.			
Principal Place of Business 100 LINCOLN RD #409 MIAMI BEACH, FL 33139		Mailing Address 100 LINCOLN RD #409 MIAMI BEACH, FL 33139	
2. Principal Place of Business 2031 SW 1ST		3. Mailing Address 2031 SW 1ST	
Suite, Apt. #, etc. 11		Suite, Apt. #, etc. 11	
City & State MIAMI, FL		City & State MIAMI, FL	
Zip 33135		Zip 33135	
Country DADE		Country DADE	
4. FEI Number 26-0020927		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FERNANDEZ, HUGO 100 LINCOLN ROAD #409 MIAMI BEACH, FL 33139		7. Name and Address of New Registered Agent Name FERNANDEZ, HUGO Street Address (P.O. Box Number is Not Acceptable) 2031 SW 1ST SUITE 11 City MIAMI FL Zip Code 33135	
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 <u>X</u> _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE DP NAME FERNANDEZ, HUGO M STREET ADDRESS 100 LINCOLN RD #409 CITY-ST-ZIP MIAMI BEACH, FL 33139	☐ Delete	TITLE DP NAME FERNANDEZ, HUGO M. STREET ADDRESS 2031 SW 1ST SUITE 11 CITY-ST-ZIP MIAMI, FL 33135	☐ Change ☐ Addition
TITLE DV NAME VELVEDERE, CRISTINA C STREET ADDRESS 100 LINCOLN RD #409 CITY-ST-ZIP MIAMI BEACH, FL 33139	☐ Delete	TITLE DV NAME BELVEDERE, CARMEN C. STREET ADDRESS 2031 SW 1ST SUITE 11 CITY-ST-ZIP MIAMI, FL 33135	☐ Change ☐ Addition
TITLE D NAME FERNANDEZ, REINALDO E STREET ADDRESS 100 LINCOLN RD #409 CITY-ST-ZIP MIAMI BEACH, FL 33139	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: <u>X</u> <u>Hugo Fernandez</u> <u>X</u> _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

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