

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2007 8:00 am
Secretary of State

02-09-2007 90030 042 ***158.75

DOCUMENT # P02000037473 1. Entity Name CRJ & ASSOCIATES, INC.					
Principal Place of Business 7220 N.W. 36TH STREET, SUITE 408 MIAMI, FL 33166			Mailing Address 7220 N.W. 36TH STREET, SUITE 408 MIAMI, FL 33166		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0969527	
5. Certificate of Status Desired ☒				Applied For Not Applied	
6. Name and Address of Current Registered Agent CHRISTIE, HARRY 7220 N.W. 36TH STREET, SUITE 528 MIAMI, FL 33166				7. Name and Address of New Registered Agent Name Harry Christie Street Address (P.O. Box Number is Not Acceptable) 7220 N.W. 36th Street, Suite #408 City Miami FL Zip Code 33166	
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. Only the Suite Number, the rest remain the same. SIGNATURE <u><i>Harry Christie</i></u> Harry Christie 2/6/2007 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☐ Delete CHRISTIE, HARRY 11724 S.W. 103 LANE MIAMI, FL 33186		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Add	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☐ Delete FERMANIAN, MARC ANTHONY P.E. 10633 N.W. 62ND CT. PARKLAND, FL 33076		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Add	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Add	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Add	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Add	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Add	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Harry Christie* **Harry Christie** **2/6/2007** (786)331-7370 Ext.301