2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2009
Secretary of State

DOCUMENT# P02000066791

Entity Name: CRYSTAL FLORIDA INC.

Current Principal Place of Business:

4280 EAST TAMIAMI TRAIL
SUITE 101
NAPLES, FL 34112

New Principal Place of Business:

Current Mailing Address:

4280 EAST TAMIAMI TRAIL
SUITE 101
NAPLES, FL 34112

New Mailing Address:

FEI Number: 68-0515198 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ARAT, ENGIN
4280 TAMIAMI TRAIL E.
SUITE 101
NAPLES, FL 34112 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	BADEMLI, MUNIP	
Address:	8897 LELY ISLAND CIRCLE	
City-St-Zip:	NAPLES, FL 34113	
Title:	V	( ) Delete
Name:	BADEMLI, BERK	
Address:	18121 ROYAL HAMMOCK BLVD	
City-St-Zip:	NAPLES, FL 34114	
Title:	V	( ) Delete
Name:	ARAT, ENGIN	
Address:	8897 LELY ISLAND CIRCLE	
City-St-Zip:	NAPLES, FL 34113	
Title:	T	( ) Delete
Name:	BADEMLI, FATMA	
Address:	8897 LELY ISLAND CIRCLE	
City-St-Zip:	NAPLES, FL 34113	
Title:	V	( ) Delete
Name:	ARAT, BURCAK	
Address:	8897 LELY ISLAND CIRCLE	
City-St-Zip:	NAPLES, FL 34113	
Title:	S	( ) Delete
Name:	BADEMLI, JENNIFER	
Address:	18121 ROYAL HAMMOCK BLVD	
City-St-Zip:	NAPLES, FL 34114	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ARAT ENGIN V 03/23/2009

Electronic Signature of Signing Officer or Director — Date