2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # PO2

P02000066791

Mailing Address

NAPLES FL 34114

1981 ROOKERY BAY DR., #502

1. Entity Name CRYSTAL FLORIDA INC.

Principal Place of Business

NAPLES FL 34114

1981 ROOKERY BAY DR. #502



FILED Feb 12, 2003 8:00 am Secretary of State

02-12-2003 90075 042 ***150.00

90024044

|--|--|

2. Principal Place of Business 6465 College Park Cie. 3. Mailing Address 6465 College Park Cie. 6465 College Park Cie.			ie.		1411 40 711 08140 0				
Suite, Apt. #, etc. Suite, Apt. #, etc.					☐ CHECK HERE IF MAKING CHANGES				
City & State Naples - FL		City & State Naple S — FL			4. FEI Number Applied For Not Applicable				
Zip Country Zip		Zip 3413	Zip Country		5. Certificate of Status Desired	□ \$	8.75 Add	ditional	
			wsn				ee Require	d'	
6. Name and Address of Current Registered Agent Name					7. Name and Address of New Registered Agent				
DADENII DEDV			Name	Name					
BADEMU, BERK			Street Ac	Street Address (P.O. Box Number is Not Acceptable)					
1981 ROOKERY BAY DR., #502									
NAPLES I	FL 34114]						
	• • • • • • • • • • • • • • • • • • •		City	. ,	, <u>, , , , , , , , , , , , , , , , , , </u>	FL	Zip Cod	e	
8. The above	named entity submits this statement for	the purpose of changing its	reaistered office or	reaistere	d agent, or both; in the State of Fig	orida. Lam fa	niliar with	and accept	
the obligat	ions of registered agent.	,,			2 agong or bong in the oracle of the	onou, rumia	Tunical Witing	and accept	
0/01/47/100									
SIGNATURE .	Signature, typed or printed name of registered agent ar	nd title if applicable. (NOTE	: Registered Agent signatur	re required w	/hen reinstating)	DATE			
	U.S. NOWING SEE 10 0450 00								
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00					9. Election Campaign Fir	nancing	\$5.0	O May Be	
	Payable to Florida Department of	State			Trust Fund Contributio	n. 🗆		to Fees	
10.	OFFICERS AND D		11,		ADDITIONS ISLANGED TO SEE	OCEDO AND E	NECTOR	7.151.44	
TITLE	P OFFICERS AND E	Delete	TITLE		ADDITIONS/CHANGES TO OFF				
NAME	BADEMLI, MUNIP	□ Delete	NAME				Change	☐ Addition	
STREET ADDRESS	1981 ROOKERY BAY DR., #502		STREET ADDRESS						
CITY-ST-ZIP	NAPLES FL 34114		CITY-ST-ZIP					i	
TITLE	V	☐ Delete	TITLE				Change	☐ Addition	
NAME	Bademli, Berk		NAME			1	onlings		
STREET ADDRESS	1981 ROOKERY BAY DR., #502		STREET ADDRESS						
CITY-ST-ZIP	NAPLES FL 34114	,	CITY-ST-ZIP						
TITLE ~:	-V	Delete	- HILE-SEC	یسے سرحمیسیدست	المراجع والمعارة المال المالا		'·Change ~	- Addition	
NAME	arat, engin		NAME				-		
STREET ADDRESS	1981 ROOKERY BAY DR., #502		STREET ADDRESS						
CITY-ST-ZIP	NAPLES FL 34114		CITY-ST-ZIP						
TITLE	T	Delete	TITLE			[Change	☐ Addition	
NAME	BADEMLI, FATMA		NAME		•				
STREET ADDRESS CITY-ST-ZIP	1981 ROOKERY BAY DR., #502		STREET ADDRESS						
	NAPLES FL 34114		CITY-ST-ZIP		, ,,=,,				
TITLE	V PAT BUDGAK	☐ Delete	TITLE				Change	Addition	
NAME STREET ADDRESS	ARAT, BURCAK		NAME OTREET AROSEGO					į	
CITY-ST-ZIP	1981 ROOKERY BAY DR., #502 NAPLES FL 34114		STREET ADDRESS CITY-ST-ZIP						
TITLE	S			•			7 06		
NAME	BADEMLI, JENNIFER	☐ Delete	TITLE NAME		•	Ĺ	Change	☐ Addition	
STREET ADDRESS	1981 ROOKERY BAY DR., #502	<i>;</i> •	STREET ADDRESS						
CITY-ST-ZIP	NAPLES FL 34114		CITY-ST-ZIP		•				

12. I hereby certify that the information supplied with this filing 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 thistee 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02.07.03

239)732661

Daytime Pl