2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P02000078874



FILED Apr 28, 2003 8:00 am Secretary of State

04-28-2003 90280 019 ***150.00

CRISTY STARK, INC.									
Principal Plac 227 LORA ST NEPTUNE BE		Mailing Address 227 LORA STREET NEPTUNE BEACH FL 32266				`			
Principal Place of Business 3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.					CHECK HERE IF MAKING CHANGES	
City & State			City & State					4. FEI Number 22 Applied For Not Applicable	
Zip Country		Zip Coun			ry	·	5. Certificate of Status Desired		
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent Name			
STARK, CRISTINA 227 LORA STREET NEPTUNE BEACH FL 32266					Street Address (P.O. Box Number is Not Acceptable)				
NEI TONE BENOTT E SEZOO								FL 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, typod or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State								9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees	
10.		OFFICERS AND	DIRECTO	RS	11.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Stark Cyfri 227 Lora St Neptune Be			☐ Delete			Cr NE	Pristing Stark TORA STREET JETTUNE BEACH, FL 32266	
TITLE NAME STREET ADDRESS CITY-ST-ZIP) <u>,</u>			Delete				☐ Change ☐ Addition	
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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 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: