

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000090551

FILED  
Apr 13, 2004  
Secretary of State

Entity Name: CRYSTALS ENLIGHTENMENT, INC.

## Current Principal Place of Business:

1521 LENOX AVE #104  
MIAMI BEACH, FL 33139

## New Principal Place of Business:

9488 PALM CIRCLE SOUTH  
PEMBROKE PINES, FL 33025 US

## Current Mailing Address:

1521 LENOX AVE #104  
MIAMI BEACH, FL 33139

## New Mailing Address:

9488 PALM CIRCLE SOUTH  
PEMBROKE PINES, FL 33025 US

FEI Number: 65-0927829

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COSTA, CARLOS V  
1521 LENOX AVE #104  
MIAMI BEACH, FL 33139 US

## Name and Address of New Registered Agent:

COSTA, CARLOS V  
9488 PALM CIRCLE SOUTH  
PEMBROKE PINES, FL 33025 US

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:

04/13/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete  
Name: COSTA, CARLOS V  
Address: 1521 LENOX AVE #104  
City-St-Zip: MIAMI BEACH, FL 33139

Title: DT ( ) Delete  
Name: COSTA LUENEBERG, CAMILA V  
Address: 9488 PALM CIRCLE SOUTH  
City-St-Zip: PEMBROKE PINES, FL 33025

Title: DV ( ) Delete  
Name: COSTA, ANDRESSA V  
Address: 1521 LENOX AVE #104  
City-St-Zip: MIAMI BEACH, FL 33139

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change ( ) Addition  
Name: COSTA, CARLOS V  
Address: 9488 PALM CIRCLE SOUTH  
City-St-Zip: PEMBROKE PINES, FL 33025 US

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 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 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: CARLOS V COSTA

DPS

04/13/2004

Electronic Signature of Signing Officer or Director

Date