

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jul 13, 2005 8:00 am**  
**Secretary of State**

07-13-2005 90021 014 \*\*\*150.00

**DOCUMENT # P03000042935**

1. Entity Name  
**CRNT - II, INC.**



Principal Place of Business

**ALLSTARS INC.  
2900 NW COMMERCE PK DR #1  
BOYNTON BEACH, FL 33426**

Mailing Address

**2900 NW COMMERCE PARK DRIVE  
#1  
BOYNTON BEACH, FL 33426**

**14018986**



04052005 No Chg-P CR2E03: (10/00)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**65-1194767**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

8. Name and Address of Current Registered Agent

**DANIELS, STEVEN L  
515 N FLAGLER DR 6 FLR  
W PALM BCH, FL 33401**

**DO NOT WRITE  
IN THIS SPACE**

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

**FILE FEE \$150.00  
May Fee \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	FRITZ, JIMMY B
STREET ADDRESS	953 BROOKDALE DRIVE
CITY - ST - ZIP	BOYNTON BEACH, FL 33435
TITLE	V
NAME	FRITZ, MARSHA
STREET ADDRESS	953 BROOKDALE DRIVE
CITY - ST - ZIP	BOYNTON BEACH, FL 33435
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNER

**4/27/05**

Date

**561498455**

Daytime Phone #

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**ATTACHMENT**  
14018986

**DOCUMENT # P03000042935**

1. Entity Name  
**CRNT - II, INC.**



Principal Place of Business

**ALLSTAIRS INC.  
2900 NW COMMERCE PK DR #1  
BOYNTON BEACH, FL 33426**

Mailing Address

**2900 NW COMMERCE PARK DRIVE  
#1  
BOYNTON BEACH, FL 33426**

**DO NOT WRITE IN THIS SPACE**

07072005 No Chg-P CR2E034 (10/03)

4. FEI Number  
**65-1194767**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**DANIELS, STEVEN L  
515 N FLAGLER DR 6 FLR  
W PALM BCH, FL 33401**

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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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$550.00  
Due by September 7, 2005**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P  
FRITZ, JIMMY B  
953 BROOKDALE DRIVE  
BOYNTON BEACH, FL 33435**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**V  
FRITZ, MARSHA  
953 BROOKDALE DRIVE  
BOYNTON BEACH, FL 33435**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
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**SIGNATURE:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7-7-05**  
Date

**5614934455**  
Daytime Phone #

ATTACHMENT

14018986

ALLSTAIRS, INC.

2900 NW Commerce Park Drive Units 1-7

Boynton Beach, FL 33426

Phone: (561) 493-4455

Fax: (561) 493-4488

Internet: [www.allstairs.com](http://www.allstairs.com)

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July 7, 2005

I received a Notice of Intent to Dissolve for:

CRNT - 11, Inc.

Document #P03000042935

I Mailed this in on April 27, 2005. I did not receive it back by mail. I called the Department of State, and they told me to write a letter explaining this. I will download another form and mail it today.

Sorry for any inconvenience,

Marsha Fritz, Vice President

CRNT - 11, Inc.