

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000150126

Entity Name: CROWN MAGAZINE, INC.

FILED  
Apr 21, 2009  
Secretary of State

## Current Principal Place of Business:

4153 S.W. 47 AVE  
SUITE:119  
DAVIE, FL 33314

## New Principal Place of Business:

4153 S.W. 47 AVE  
SUITE:119  
DAVIE, FL 33029

## Current Mailing Address:

4153 S.W. 47 AVE  
SUITE:119  
DAVIE, FL 33314

## New Mailing Address:

20010 N.W. 2 ND ST  
PEMBROKE PINES, FL 33029

FEI Number: 90-0124832

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

OSHDARY, KAYVAN  
20010 NW 2ND ST.  
PEMBROKE PINES, FL 33029 US

## Name and Address of New Registered Agent:

OSHDARY, KAYVAN  
20010 N.W. 2 ND ST  
PEMBROKE PINES, FL 33029 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: KAYVAN OSHDARY

04/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: OSHDARY, KAYVAN  
Address: 20010 NW 2ND ST.  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: V ( ) Delete  
Name: MOHAMMAD, JAMALI  
Address: 331 N.W. 78TH TERR. BLDG. 31, APT. 204  
City-St-Zip: PEMBROKE PINES, FL 33024

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change ( ) Addition  
Name: MOHAMMAD, JAMALI  
Address: 331 N.W. 78TH TERR. BLDG. 31, APT. 204  
City-St-Zip: PEMBROKE PINES, FL 33029

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: KAYVAN OSHDARY

P

04/21/2009

Electronic Signature of Signing Officer or Director

Date