2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 29, 2007 8:00 am Secretary of State

1. Entity Nam	DOCUMENT # P06000025716 1. Entity Name CRLI, INC.							03-29-2007	7 90016 04	1 ***150).00
Principal Place of Business				Mailing Address			Ī _	2000			
800 W CYPRESS CREEK ROAD				800 W CYPRESS CREEK ROAD			400	44106			
470				470			•				
FORT LAUDERDALE, FL 33309			ŀ	FORT LAUDERDALE, FL 33309				IN MENINE METIN MENIEM METINE A			18 1 1 18 1 1
2. Principal Place of Business - No P.O. Box #			3.	Mailing Address							
	Suite, Apt. #, etc.			Suite, Apt. #, etc.			-{				
465							01172007	Chg-P	CR2E03	4 (12/06)	
City & State FORT LAUDERDACE				City & State			4. FEI Numb			<u> </u>	plied For t Applicable
Zip	0.0	Country	_ _	Zip	Cour	ntry	1	e of Status Desired		8.75 Add	
^{Zip} 333	109	BROWARD	1 2 - 1				<u> </u>		F	ee Required	đ
	6. Name	and Address of Curre	nt Kegis	stered Agent	Name	7. Name an	d Address of New	Registered A	gent		
LEGEL, LARRY						Street Address (P.O. Box Number is Not Acceptable)					
800 W CYPRESS CREEK ROAD						Street Address	(P.O. Box Numb	per is Not Acceptai	ble)		
470 FORT LAUDERDALE, FL 33309											
		•				City			FL	Zip Code	9
9 The above	nomed entit	y submits this statement	for the	ouropeo of changing its	ragiotar	and office or registe	rad agant or be	ath in the State of		emiliar with	and aggest
	ions of regist		i ioi ii e j	purpose of changing its	register	ed office of registe	red agent, or be	oal, in the state of	rionoa. Taili ia	uranzu witit,	and accept
SIGNATURE											
SIGNATURE_	Signature, typed	or printed name of registered ag-	ent and title	if applicable. (NOT	E: Registere	ed Agent signatura require	d when reinstating)		DATE		
		FEE IS \$150.00 7 Fee will be \$550	0.00	9. Election Campa Trust Fund Con	_		.00 May Be ded to Fees				
10.		OFFICERS AN	ID DIRE	CTORS	11.		ADDITIONS	/CHANGES TO O	FFICERS AND	DIRECTORS	S IN 11
TITLE	P,D Delete TITU									☐ Change	☐ Addition
NAME STREET ADDRESS	LEGEL, LARRY 800 W CYPRESS CREEK ROAD #470 SIRE					ME EET ADDRESS					
CITY-ST-ZIP		JDERDALE, FL 333		0		r-ST-ZIP					
TITLE				☐ Delete	TOF	E			•	☐ Change	Addition
NAME					NAM						
STREET ADORESS CITY-ST-ZIP						EET ADDRESS (-ST-ZIP					
TITLE				□ Delete	TITL					Change	Addition
NAME					NAM	1					
STREET ADDRESS						EET ADDRESS					
CITY-ST-ZIP				[] police	-1-	(-ST-ZIP				☐ Change	☐ Addition
title Name				☐ Delete	TITL					∟ ∪iange	☐ Addition -
STREET ADDRESS						EET ADORESS					
CITY-\$1-2IP						r-ST-ZIP					_
TITLE NAME				☐ Delete	TITL					☐ Change	Addition
STREET ADDRESS						EET ADDRESS					ĺ
CITY-ST-ZIP					City	r-ST-ZIP					
TITLE				☐ Delete	TITL					Change	☐ Addition
NAME STREET ADDRESS					NAM STRI	AE EET ADORESS					
CITY-ST-ZIP						r-ST-ZIP					1
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Carry legel LARRY LEGEL 3.24.7 9TV 4938900											
SIGNAT	UKE: _	SIGNATURE AND TREED O	ID DE NTE	D NAME OF SIGNING OFFICER	OP DIREC	TOP		7. / / /	· · •/~ 0	utime Phone #	