## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Apr 14, 2008 8:00 am Secretary of State 04-14-2008 90021 042 \*\*\*150.00

DOCUMENT # P07000081749  1. Entity Name ROSE & CRYSTAL INC							)    -	04-14-2008	-	42 ***15	0.00
Principal Place of Business Mailing Address						!	կլսս	<b>-</b>			
3717 103RD AVENUE N CLEARWATER, FL 33762				3717 103RD AVENUE N CLEARWATER, FL 33762					M 86:81 (2161 17	PIG 1870 BITIS 18	ijeri n tret
2. Principal Place of Business - No P.O. Box #				3. Mailing Address							
Suite, Apt. #, etc.			Su	Suite, Apt. #, etc.			01212008	Chg-P	CR2E0	34 (12/06)	
City & State			<u> </u>	y & State	·	4. FEI Numb	556813		_ No	plied For t Applicable	
Zip	Country		Zip	Zip Co		itry	5. Certificate of Status Desired S8.75 Additional Fee Required				
	6. Name	and Address of Current	7. Name and Address of New Registered Agent								
KUSHNIR, PETRO						Name					
3717 103RD AVENUE N STATE CLEARWATER, FL 33762						Street Address (P.O. Box Number is Not Acceptable)					
				City					FL	Zip Code	9
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 a										and accept	
the obligations of registered agent.											
SIGNATURE.	Signature, typed	or printed name of registered agen	pplicable. (NOT	d Agent signature require	ed when reinstating)		DATE				
FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00  9. Election Campaign Finar Trust Fund Contribution.							5.00 May Be ided to Fees				
10.	10. OFFICERS AND DIRECTORS						ADDITIONS	/CHANGES TO OFF	ICERS AND	DIRECTOR	S IN 11
TITLE	P Delete					E				☐ Change	Addition
NAME	KUSHNIR, PETRO 3: ss 3717 103RD AVENUE N				NAM	- 1					
STREET ADDRESS CITY-ST-ZIP	CLEARW	ATER, FL 33762				ET ADDRESS -ST-ZIP					
TITLE	VP Delete IIIT					· .				☐ Change	☐ Addition
NAME STREET ADDRESS	KUSHNIR, RUSLANA 3717 103RD AVENUE N STR					ET ADDRESS				•	!
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STREET ADDRESS CITY-ST-ZIP					ET ADDRESS -ST-ZiP						
12. I hereby	certify that th	e information supplied wit	th this filir	ng does not qualify for	or the ex	emptions contains	ed in Chapter 11	9, Florida Statutes. I	further cert	ify that the in	nformation
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.											

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