## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000103663

Entity Name: CRIELA, INC.

FILED Mar 24, 2009 Secretary of State

•	,				
Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
14741 SW 143 ST MIAMI, FL 33196				3057 SW PORPOISE CIRCLE STUART, FL 34997 US	
Current Mailing Address:			New Mailing Addr	New Mailing Address:	
14741 SW 143 ST MIAMI, FL 33196			POB 246013 PEMBROKE PINES, FL 33024 US		
FEI Number:	: 74-3242120	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Addres	Name and Address of New Registered Agent:	
LOUIS JR, FRANTZ 14741 SW 143 ST MIAMI, FL 33196 US			3057 SW PORPOIS	LOUIS JR, FRANTZ 3057 SW PORPOISE CIR STUART, FL 34997 US	
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registe	ered office or registered agent, or both,	
SIGNATURE: FRANTZ LOUIS JR				03/24/2009	
Election Car		nic Signature of Registered Ago g Trust Fund Contribution().	ent	Date	
	S AND DIREC	-	ADDITIONS/CHAN	NGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	P ( LOUIS JR, FRA 14741 SW 143 MIAMI, FL 331	ST	Title: Name: Address: City-St-Zip:	( ) Change( ) Addition	
Title: Name: Address: City-St-Zip:	D ( SHAMBLEY, AI 2950 NE 190TI AVENTURA, FL	H ST STE 210	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V ( KNOWLES, ST 25350 LAWN S ROSEVILLE, M	ST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	T ( ELIE JR. RON	) Delete ALD	Title: T Name: RODRIG	(X) Change()Addition GUEZ. DOMINIQUE	

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.

Address:

City-St-Zip:

3929 WALDROP HILLS

DECATUR, GA 30034

SIGNATURE: FRANTZ LOUIS JR P 03/24/2009

8253 PINE VERDE LANE

JACKSONVILLE, FL 32244

Address:

City-St-Zip: