2005 FOR PROFIT CORPORATION - ANNUAL REPORT

Secretary of State DOCUMENT # P93000043846 CRYSTAL CARE INTERNATIONAL, INC. Principal Place of Business Mailing Address 18228 HANNA RD 18228 HANNA RD LUTZ, FL 33549 LUTZ, FL 33549 CR2E034 (10/03) 04292005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3185788 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE NEHR, MICHAEL W 18228 HANNA RD LUTZ, FL 33549 __ 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 ubligations of registered agent Signature, typed or printed name of registered agent and title if applicable INOTE: Repistered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution Added to Fees 10. OFFICERS AND DIRECTORS PCD THE NEHR, MICHAEL W NAME STREET ADDRESS **18228 HANNA RD** COY-ST-ZP LUTZ, FL 33549 U00000359713 05/05/05-80004-004 150.00 HILL NAME STREET ADDRESS CITY-ST-7IP 1111 6 NAME STREET ADDRESS DO NOT WRITE DHY-SI-20 IN THIS SPACE fille NAME STREET ADDRESS CITY-ST-ZP DILL NAME STREET ADDRESS GIV-SI-ZP utif STREET ADDRESS City-St-ZP does not qualify for the exemption stated in Section 119 07(3)(i). Florida Statutes, I further certify that the information accorate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director secule this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 10 or Block 11 if tike empowered 12. Thereby certify that the indicated on this report of the corporation of a changed, or on an at att

MICHAEL W. NEHA

ID TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE

FILED

May 03, 2005 08:00 AM