## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000058130 (4)

CRYSTAL BEACH REALTY, INC.

## FILED Apr 20 1998 8:00am Secretary of State



Principal Place	o al Duninana	National Address	*		<b>                                    </b>
1 '		Mailing Address			
1985 HIGHWAY 98 EAST DESTIN FL 32541		PO BOX 1735 DESTIN FL 32540		]	
DESTRICT WEST		US		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				08/16/1993	
2. Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 4652 GULF STARE DR.		26		59-3167431	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		Election Campaign Financing	\$5.00 May Be
23 Des 1		28		Trust Fund Contribution	Added to Fees
Zip 24 325	Country	Zip	Country	8. This corporation owes or has paid the p	
24 325		29 3	0		Yes No
Name and Address of Current Registered Agent     10. Name and Address of New Registered Agent     Name     Name					
COHEN, CLIFF A					
1965 HIGHWAY 98 EAST 82 3				ddress (P.O. Box Number is Not Acceptable)	
DESTIN FL 32541			465	52 GULF STAKE DR	
			83		
			84 Ci <u>ty</u>		85 Zip Code
			De	STIN FL	.  32 <i>541</i>
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered					
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE					
Signature: typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
12.	OF FICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	COHEN, CLIFF A	☐ DELETE	1.1 TITLE		Change Addition
NAME			1.2 NAME	WES CHE STARE DR.	
STREET ADDRESS	1965 HIGHWAY 98 EAST		1.3 STREET ADDRESS	4652 GULF STARR DR. Destin Fl 32541	
CITY-ST-ZIP	DESTIN FL 32541			DESTIN PC 365TI	
TITLE	00011 141	☐ DELETE	2.1 TITLE		Change Addition
NAME	ODOM, JAY		2.2 NAME	HLSZ GULF STARR D	_
STREET ADDRESS	1965 HWY 98 EAST		2.3 STREET ADDRESS	, — — — , ·	<b>'</b>
CITY-ST-ZIP	<b>D</b> ESTIN FL		2.4 CITY-ST-ZIP	DESTIN PL 32841	
TITLE		☐ DELETE	31 THTLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		☐ DELET <b>E</b>	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY+ST-ZIP			4.4 CITY - ST - ZIP		į
TITLE	-	☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		ļ
CITY-ST-ZIP			5.4 CITY - ST - ZIP		ļ
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP		1	6.4 CITY-ST-ZIP		
			2.3 OKT 01:E0		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied ental annual report is plue 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with projections.

11-10-

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