

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra H. Mathiam
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

MAY 11 AM 8:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000074380 (5)**

1. Corporate Name

CRIS ENTERPRISES, INC.

DO NOT WRITE IN THIS SPACE

1. Principal Office Location	Main Office Address
1336 KILLIAN ST DAYTONA BEACH FL 32114	1336 KILLIAN ST DAYTONA BEACH FL 32114

3. Date Incorporated or Created 10/21/1993	3a. Date of Last Report 05/01/1994
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2. Principal Place of Business 21	2a. Mailing Address 26	4. FPI Number 59-3223017	Applied For <input type="checkbox"/> Not Applicable
22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23. City & State	28. City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24. Zip	25. Country	29. Zip	30. Country
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	

**MITCHELL, JEROME D
SECOND FLOOR
125 N RIDGEWOOD AVE
DAYTONA BEACH FL 32114**

B1. Name	B2. Street Address (P.O. Box Number is Not Acceptable)	B3.	B4. City	B5. Zip Code
			FL	

11. Pursuant to the provisions of Sections 607.0602 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, thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.1 NAME STREET ADDRESS CITY, STATE, ZIP	PSTV DOWNS, CHRISTINE 1336 KILLIAN ST DAYTONA BEACH FL 32114	13.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.2 NAME STREET ADDRESS CITY, STATE, ZIP		13.2 NAME 13.3 STREET ADDRESS 13.4 CITY, STATE, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.3 NAME STREET ADDRESS CITY, STATE, ZIP		13.3 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.4 NAME STREET ADDRESS CITY, STATE, ZIP		13.4 NAME 13.5 STREET ADDRESS 13.6 CITY, STATE, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.5 NAME STREET ADDRESS CITY, STATE, ZIP		13.5 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.6 NAME STREET ADDRESS CITY, STATE, ZIP		13.6 NAME 13.7 STREET ADDRESS 13.8 CITY, STATE, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.7 NAME STREET ADDRESS CITY, STATE, ZIP		13.7 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.8 NAME STREET ADDRESS CITY, STATE, ZIP		13.8 NAME 13.9 STREET ADDRESS 13.10 CITY, STATE, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not apply for the foregoing state (or the term 109 (1) (a) Florida Statutes). I further certify that the information relates to the annual report or supplemental annual report, as the case may be, 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 owner or trustee (owner/trustee) to make into this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 of Block 13 of a change or an annual statement with an address.

SIGNATURE: *Christine S. Downs*
SIGNATURE AND TYPE OR PRINTED NAME OF BOILING OFFICER OR DIRECTOR

20 Apr 95 904/238-2572