### 2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

#### **DOCUMENT # P93000075158**

CRESCENT-HEIGHTS INVESTMENTS, INC.-



Principal Place of Business

2930 BISCAYNE BLVD MIAMI, FL 33137

Mailing Address

2930 BISCAYNE BLVD MIAMI, FL 33137

# **FILED** Aug 17, 2005 8:00 am Secretary of State

08-17-2005 90002 046 \*\*\*150.00



07122005

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-0445086 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

CHRISTENBURY, SHARON ESQ. 2930 BISCAYNE BLVD MIAMI, FL 33132

GALBUT, RUSSELL W

2930 BISCAYNE BLVD

MIAMI, FL 33137

DACHOH, SHLOMO

MIAMI, FL 33137

MENIN, BRUCE

MIAMI, FL 33137

ZDON, JOSEPH 2930 BISCAYNE BLVD

MIAMI, FL 33137

DSV

2930 BISCAYNE BLVD

2930 BISCAYNE BLVD

2930 BISCAYNE BLVD MIAMI, FL 33137

CHRISTENBURY, SHARON

## DO NOT WRITE IN THIS SPACE

	named entity submits this statement for thions of registered agent.	e purpose of cha	nging its registere	d office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.			·			
0,0,1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Signature, typed or printed name of registered agent and	litle if applicable.	(NOTE: Registered	Agent signature	required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00  Due by September 7, 2005  9. Election Campaign Fir Trust Fund Contribution				cing	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10. OFFICERS AND DIRECTORS					· — · — · · —	
TITLE	CD					
NAME	KAHN, SONNY					
STREET ADDRESS	2930 BISCAYNE BLVD					
CITY-ST-ZIP	MIAMI, FL 33137					
TITLE	PD					

## DO NOT WRITE IN THIS SPACE

12. 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 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 empoyered 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, while other like empowered.

SIGNATURE:

NAME

TITLE

NAME

NAME

TITLE

NAME STREET ADDRESS

CITY-ST-7IP TITLE NAME

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

Sharon Christenbury, Vice President 7.22.05 305.374.5700

TED NAME OF SIGNING OFFICER OR DIRECTOR