

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathum
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

MAY 19 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000023657 (7)

1. Corporation Name:

KRYSTALLIA CRANE CORP.

Principal Place of Business:

Mailing Address:

**5724 DEAUVILLE CIRCLE
STE. H-306
NAPLES FL 33962**

**5724 DEAUVILLE CIRCLE
STE. H-306
NAPLES FL 33962**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

03/11/1994

4. FEI Number

Applied For

Not Applicable

650471924

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes. ☐ Yes ☒ No

2. Principal Place of Business:

2a. Mailing Address:

21. Suite, Apt. # etc.

26. Suite, Apt. # etc.

22. City & State

27. City & State

23. Zip

24. County

28. Zip

29. County

25. Zip

26. County

30. Zip

31. County

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CRANE, KRYSTALLIA
5724 DEAUVILLE CIRCLE
STE. H-306
NAPLES FL 33962**

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83. City

84. Zip

FL

85. Zip Code

11. Pursuant to the provisions of Sections 602.01(2) and 602.01(3), 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 the registered agent, Florida Statutes.

SIGNATURE

Signature of Registered Agent (Print Name, Title, and Address)

Signature of Registered Agent (Print Name, Title, and Address)

12.

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN:

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN:
1. NAME D CRANE, KRYSTALLIA 5724 DEAUVILLE CIRCLE NAPLES FL 33962	1. NAME ☐ Change ☐ Addition
2. NAME	2. NAME ☐ Change ☐ Addition
3. NAME	3. NAME ☐ Change ☐ Addition
4. NAME	4. NAME ☐ Change ☐ Addition
5. NAME	5. NAME ☐ Change ☐ Addition
6. NAME	6. NAME ☐ Change ☐ Addition
7. NAME	7. NAME ☐ Change ☐ Addition
8. NAME	8. NAME ☐ Change ☐ Addition
9. NAME	9. NAME ☐ Change ☐ Addition
10. NAME	10. NAME ☐ Change ☐ Addition
11. NAME	11. NAME ☐ Change ☐ Addition
12. NAME	12. NAME ☐ Change ☐ Addition
13. NAME	13. NAME ☐ Change ☐ Addition
14. NAME	14. NAME ☐ Change ☐ Addition
15. NAME	15. NAME ☐ Change ☐ Addition
16. NAME	16. NAME ☐ Change ☐ Addition
17. NAME	17. NAME ☐ Change ☐ Addition
18. NAME	18. NAME ☐ Change ☐ Addition
19. NAME	19. NAME ☐ Change ☐ Addition
20. NAME	20. NAME ☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in law from 199.032, Florida Statutes. I further certify that the information included on this annual report or supplemental annual 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 that my name or business is empowered to execute this report as required by Chapter 199, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on an affidavit with an address.

SIGNATURE:

Krystallia Crane - KRYSTALLIA CRANE, PRES 5/15/95 813-7933441

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR