

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 JUL 26 AM 10:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000078083 (0)

1. Corporation Name

CROWNING GLORY, INC.

Principal Place of Business

6011 RODMAN ST.
SUITE 205
HOLLYWOOD FL 33023

Mailing Address

6011 RODMAN ST.
SUITE 205
HOLLYWOOD FL 33023

900001551189

-08/01/95--01108--003

*****200.00 *****200.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/25/1994

3a. Date of Last Report

2. Principal Place of Business

21 1729 W. LAS OLAS BLVD
Suite, Apt. #, etc.

2a. Mailing Address

26 1729 W. LAS OLAS BLVD
Suite, Apt. #, etc.

4. FEI Number

65-0538227

Applied For

Not Applicable

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. 198.035,
Florida Statutes ☐ Yes ☐ No

City & State

23 FT. LAUDERDALE, FL

City & State

28 FT. LAUDERDALE, FL

Zip

24 33312

County

25 BROWARD

Zip

29 33312

County

30 BROWARD

9. Name and Address of Current Registered Agent

CORPORATION INFORMATION SERVICES INC.
1201 HAYS ST.
TALLAHASSEE FL 32301

10. Name and Address of Now Registered Agent

81 Name

Ronald Neil Stern-D

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

1729 W. LAS OLAS BLVD.

83

84 City

FT. LAUDERDALE

FL

85 Zip Code

33312

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]

(Print Name of Registered Agent) Signature required when appointing

4-22-95

12. OFFICERS AND DIRECTORS

TITLE Director
NAME Ronald Neil Stern
STREET ADDRESS 1729 W. LAS OLAS BLVD.
CITY, ST, ZIP FT. LAUDERDALE, FL 33312

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY, ST, ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY, ST, ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(4)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect and make no other claim that I am an officer or director of the corporation or the receiver or trustee 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 an address.

SIGNATURE:

[Signature]

4-22-95

Date

(Signature) (Print Name)

Ronald Neil Stern