2003 FOR PROFIT CORPORATION

P95000011185

UNIFORM BUSINESS REPORT (UBR

DOCUMENT # 1. Entity Name

STREET ADDRESS

SIGNATURE:

changed, or on an attachment with an address, with all other like empe

CITY-ST-ZIP

CROWN ACCOUNTING, INC.

Principal Place of Business SMINITER ROAD #101 COCONUT CREEK FL 33073 US 2, Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City
COONUT CREEK FL 33073 2. Principal Place of Business 3. Meiling Address Suite, Apt. #, etc. City & State City
US 2. Principal Place of Business 3. Melling Address Sulle, Apt. #, etc. Sulle, Apt. #, etc. Sulle, Apt. #, etc. City & State Check Here if Making CHANGES City & State 4. FEI Number 65-056 1627 Applied Fox Poly Additional Poly Addition
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State Country Zip Country Zip Country Screet Address of Current Registered Agent Name Na
Suite, Apt. #, etc. City & State City & Status Desired Applied For Not Applicable S8.75 Additional Fee Required Replicable Replica
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Zip Country Zip Country 5. Certificate of Status Desired
S. Certificate of Status Desired Fee Required
Name and Address of Current Registered Agent Street Address of New Registered Agent Name
Name
Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code City FL Zip Code City FL Zip Code City FL Signature. Speed or protect name of includement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature. Speed or protect name of registered agent ag
Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code City FL Zip Code City FL Zip Code City FL Signature. Speed or protect name of includement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature. Speed or protect name of registered agent ag
Addition Title VPS
City FL Zip Code 6. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature. Typed or privated name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) PILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE LARRY J. HOOD STREET ADDRESS CITY-ST-ZIP TITLE VPS JUNE HOOD STREET ADDRESS CITY-ST-ZIP TITLE PT Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE PT Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE Delete Delete TITLE Delete TITLE Delete TITLE Delete Delete TITLE Delete Delete TITLE Delete Delet
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SiGNATURE Signature: typed or proted name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE
The obligations of registered agent. SiGNATURE Signature. typed or printed name of registered agent and life if applicable. FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Added to Fees 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE PT
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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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

FILED Apr 07, 2003 8:00 am Secretary of State

04-07-2003 91053 041 ***150.00

Daytime Phone #