

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1996**



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

DOCUMENT # **P95000053684 (3)**

1. Corporation Name

**CRICHTON CORPORATION**



Principal Place of Business

**7160 MOSLEY STREET  
HOLLYWOOD FL 33024**

Mailing Address

**7160 MOSLEY STREET  
HOLLYWOOD FL 33024**

2. Principal Place of Business

2a. Mailing Address

21 **809 N. STATE RD.7**

26 **809 N. STATE RD.7**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 **HOLLYWOOD, FLORIDA**

28 **HOLLYWOOD, FLORIDA**

Zip

Country

Zip

Country

24 **33021**

25 **U.S.A.**

29 **33021**

30 **U.S.A.**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SUGERMAN, KAREN  
1550 N.E. MIAMI GARDENS DR.  
SUITE 305  
N MIAMI BEACH FL 33179**

81 Name **BLANCA CRICHTON**

82 Street Address (P.O. Box Number is Not Acceptable)  
**809 N STATE RD #7**

83

84 City **HOLLYWOOD** FL 85 Zip Code **33021**

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]*

(NOTE: Registered Agent signature required when transferring)

**APRIL 25/96**

DATE

12. OFFICERS AND DIRECTORS

TITLE **PRESIDENT** ☐ DELETE  
NAME **BLANCA CRICHTON**  
STREET ADDRESS **7160 MOSLEY ST.**  
CITY-STATE-ZIP **HOLLYWOOD, FL 33024**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ DELETE  
NAME  
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TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE **PRESIDENT** ☐ Change ☒ Addition  
12 NAME **BLANCA CRICHTON**  
13 STREET ADDRESS **7160 MOSLEY ST.**  
14 CITY-STATE-ZIP **HOLLYWOOD, FL 33024**

21 TITLE ☐ Change ☐ Addition  
22 NAME  
23 STREET ADDRESS  
24 CITY-STATE-ZIP

31 TITLE ☐ Change ☐ Addition  
32 NAME  
33 STREET ADDRESS  
34 CITY-STATE-ZIP

41 TITLE ☐ Change ☐ Addition  
42 NAME  
43 STREET ADDRESS  
44 CITY-STATE-ZIP

51 TITLE ☐ Change ☐ Addition  
52 NAME  
53 STREET ADDRESS  
54 CITY-STATE-ZIP

61 TITLE ☐ Change ☐ Addition  
62 NAME  
63 STREET ADDRESS  
64 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 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 12 or Block 13 if I am named, or on an attachment with an address.

SIGNATURE:

*[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**BLANCA CRICHTON** **APRIL 25/96** **9549670079**

(Signature - Print Name)

CR2E034 (12/95)