

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 27 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P96000037304 (8)

1. Corporation Name
CRAZY CORP.

Principal Place of Business

5501 NW 72 AVE.
MIAMI FL 33166

Mailing Address

5501 NW 72 AVE.
MIAMI FL 33166



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/30/1996

4. FEI Number

65-0661246

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.



Yes



No

2. Principal Place of Business

21 10862 NW 27th STREET

Suite, Apt. #, etc.

2a. Mailing Address

26 10862 NW 27th STREET

Suite, Apt. #, etc.

City & State

23 MIAMI FL.

Zip

24 33172

Country

City & State

28 MIAMI FL.

Zip

29 33172

Country

30

9. Name and Address of Current Registered Agent

SCORT, DIEGO
750 SW 174TH TER.
PEMBROKE PINES FL 33029

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME SCORT, DIEGO
STREET ADDRESS 750 SW 174 TER.
CITY-ST-ZIP PEMBROKE PINES FL 33029

☐ DELETE

TITLE D
NAME OREFICE, SERGIO W
STREET ADDRESS ALAMEDA COLONIA 132 ALPHAVILLE, ZERO BAVER
CITY-ST-ZIP SAO PAULO, BRAZIL 065-000

☐ DELETE

TITLE D
NAME OREFICE, MRINHA
STREET ADDRESS ALAMEDA COLONIA 132 ALPHAVILLE, ZERO BAVER
CITY-ST-ZIP SAO PAULO, BRAZIL 065-000

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change

☒ Addition

☐ Change

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☐ Addition

14. 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 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 changed, or on an attachment with an address.

SIGNATURE:

[Signature]

SCORT, DIEGO

PRESIDENT

4-30-98 (305)4637800

CR2E034 (10/97)