

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED

97 SEP 29 AM 10:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # *P96000053659*

1. Corporation Name

CROWN MEDICAL SYSTEMS, INC.

Principal Place of Business
7871 N.W. 15th Street
Miami, FL 33126

Mailing Address
same as principal

3. Date Incorporated or Qualified
June 18, 1996

3a. Date of Last Report
this is first

2. Principal Place of Business
21 2833 Bird Avenue
Suite Apt. # etc.

2a. Mailing Address
26 2833 Bird Avenue
Suite Apt. # etc.

4. FEI Number
65-0693875

App. ed For
Not Applicable

22 City & State
23 Miami, Florida 33133
Zip Country

27 City & State
28 Miami, Florida 33133
Zip Country

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. '99-032.
Florida Statutes ☐ Yes ☒ No

24 33133 25 USA

29 33133 30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Eduardo Naranjo
7871 N.W. 15th Street
Miami, Florida 33126

81 Name
B & C Corporate Services, Inc.
82 Street Address (P.O. Box Number is Not Acceptable)
201 S. Biscayne Boulevard
83 Suite 3000
84 City
Miami FL 85 Zip Code
33131

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 warrant, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Anna Salgado* Anna Salgado, Vice President 9/25/97

12. OFFICERS AND DIRECTORS

TITLE D
NAME Mendoza, Rafael E.
STREET ADDRESS 7871 N.W. 15th Street
CITY-STATE-ZIP Miami, FL 33126 ☐ DELETE

TITLE D
NAME Naranjo, Eduardo
STREET ADDRESS 7871 N.W. 15th Street
CITY-STATE-ZIP Miami, FL 33126 ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D, COB, S,T
NAME Mendoza, Rafael E.
STREET ADDRESS 2833 Bird Avenue
CITY-STATE-ZIP Miami, FL 33133 ☒ Change ☒ Addition

TITLE D,P
NAME Naranjo, Eduardo
STREET ADDRESS 2833 Bird Avenue
CITY-STATE-ZIP Miami, FL 33133 ☒ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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. I changed or on an attachment with an address.

SIGNATURE: *Eduardo Naranjo* EDUARDO NARANJO, President 9/25/97

CR2E034 (9-96)