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FILED
Apr 14 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000060221 (4)

1. Corporation Name
CRYSTAL NOTE, INC.

Principal Place of Business
**504 NORTH PARKWAY
GOLDEN BEACH FL 33160-0000**

Mailing Address
**504 NORTH PARKWAY
GOLDEN BEACH FL 33160-2253**



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

26. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

**INTRASTATE REGISTERED AGENT CORPORATION
701 BRICKELL AVENUE
SUITE 3000
MIAMI FL 33131**

81
82
83
84

3. Date Incorporated or Qualified
07/18/1996

3a. Date of Last Report
N/A

4. FEI Number
65-0683197

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. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

**Mark Katsman, Esq.
Roth & Milne
9350 S. Dixie Highway, Ph 2
Miami, Florida 33156**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation certifies and 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 *Mark Katsman*
Signature, typed or printed name of registered agent and tax, if applicable

(NOTE: Registered Agent signature required when reinstating)

4/8/97
DATE

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	ARTSIBACHEV, VLADIMIR	
STREET ADDRESS	504 NORTH PARKWAY	
CITY-ST-ZIP	GOLDEN BEACH FL 33160	
TITLE	D	☐ DELETE
NAME	ARTSIBACHEV, NINA	
STREET ADDRESS	504 NORTH PARKWAY	
CITY-ST-ZIP	GOLDEN BEACH FL 33160	
TITLE	D	☐ DELETE
NAME	KHACHATURIAN, ANGELA	
STREET ADDRESS	504 NORTH PARKWAY	
CITY-ST-ZIP	GOLDEN BEACH FL 33160	
TITLE	D	☐ DELETE
NAME	FIN'KO, OLEG	
STREET ADDRESS	504 NORTH PARKWAY	
CITY-ST-ZIP	GOLDEN BEACH FL 33160	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 do 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*

4/8/97 (305) 692-9212

CR2E034 (9/96)