


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2005 8:00 am
Secretary of State

01-13-2005 90004 025 ***158.75

DOCUMENT # P96000100814

1. Entity Name
KRISTI PROPERTIES, INC.



Principal Place of Business
**7330 WEST 20TH AVE.
 MIAMI LAKES, FL 33016-1835**

Mailing Address
**7330 WEST 20TH AVE.
 MIAMI LAKES, FL 33016-1835**

50004170

2. Principal Place of Business
14160 NW 77 CT, PH-32
 Suite, Apt. #, etc.

3. Mailing Address
14160 NW 77 CT
 Suite, Apt. #, etc.
PH-32

City & State
MIAMI LAKES, FL

City & State
MIAMI LAKES, FL

Zip
33016

Country



01052005 Chg-P CR2E034 (10/03)

4. FEI Number
65-0716123

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**COSTA, HELEN C ESQ.
 7330 WEST 20TH AVE.
 MIAMI LAKES, FL 33016-1835**

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
14160 NW 77 CT, PH-32
 City **MIAMI LAKES** FL Zip Code **33016**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COSTA, REINALDO 7330 WEST 20TH AVE. MIAMI LAKES, FL 330161835 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 14160 NW 77 CT, PH-32 MIAMI LAKES, FL 33016
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COSTA, HELEN C 7330 WEST 20TH AVE. MIAMI LAKES, FL 330161835 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 14160 NW 77 CT, PH-32 MIAMI LAKES, FL 33016
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ **1/10/05** **305 5584092**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



ATTACHMENT
Division of Corporations

50002176

2005 Annual Report

**Listed below is the most recent information reported for the entity.
Please review and click the appropriate button at the bottom to generate the annual
report form.**

This information cannot be changed on the report.	
Document Number	P96000100814
Business Entity Name	KRISTI PROPERTIES, INC.
Original File Date	12/12/1996

FEI Number 65-0716123

Principal Address 7330 WEST 20TH AVE.
MIAMI LAKES, FL 330161835

Mailing Address 7330 WEST 20TH AVE.
MIAMI LAKES, FL 330161835

Registered Agent ESQ. HELEN C COSTA
7330 WEST 20TH AVE.
MIAMI LAKES, FL 330161835

Officer/Director Name And Address

D
REINALDO COSTA
7330 WEST 20TH AVE.
MIAMI LAKES, FL 330161835

D
HELEN C COSTA
7330 WEST 20TH AVE.
MIAMI LAKES, FL 330161835

If all of the above information is correct and you do not wish to make any changes, please select:

If you need to make changes to the above information, please select:

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