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

PROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000027556 (4) CRW MEG. INC.

FILED Jan 16 1998 8:00am Secretary of State

I CENA I	VIFG., INC.							
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Principal Plac	ce of Business	Mailing Address					Il i	
		-						
13233 SUNFISH DRIVE 13233 SUNFISH DRIVE HUDSON FL 34667 HUDSON FL 34667						DO NOT WRITE IN THIS SPACE		
}						3. Date Incorporated or Qualified		
						03/19/1997		
2. Principal F	Place of Business	2a. Mailing Address			4. FE! Number Applied	For		
21		26			59-3438160 Not App	licable		
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Addition			
City & State		City & State			Fee Required			
-						6. Election Campaign Financing \$5.00 May B Trust Fund Contribution Added to Fee		
Zip	28			ntrv/			 ,	
24	25	 -	30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	e	
Z4	25 29 30 9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent		
				87 1	Name	10.		
	IST, LAWRENCE J							
13233 SUNFISH DRIVE HUDSON FL 34667				82 3	Street Addres	idress (P.O. Box Number is Not Acceptable)		
nu	1030N FL 34007		1	83				
				-				
			[8	B4 (City	FL 85 Zip Code		
44 Durament	to the e-culcions of Spations 607 050	2 and 607 1500 Florido Statuta	a the ob		amod aarna		torod	
office or a	registered agent, or both, in the State	of Florida, Such change was a	uthorized	by th	he corporatio	ration submits this statement for the purpose of changing its regist on's board of directors. I hereby accept the appointment as registe	eted	
agent. I a	ım familiar with, and accept the obliga	itions of, Section 607.0505, Flo	rida Statu	ites.			ĺ	
SIGNATURE					 	d when reinstating) DATE)	
12.	Signature, typed or printed name of registered ages OFFICERS AND		13,	Agent s	signature required	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	-	
TITLE	PTD	DELETE	1.1 TITLE				ddition	
NAME	FEIST, LAWRENCE J		1.2 NAME		}	Julius Land		
	13233 SUNFISH DRIVE		1.3 STREET ADDRESS		DDrrr.			
STREET ADDRESS	HUDSON FL 34667		1.4 CITY - ST-ZIF		1		15	
CITY-ST-ZIP	SVD	DELETE	2.1 TITLE		<u> </u>	Change A	ddition	
NAME	MESECK-BUSHEY, SYLVIA J	_ 5534.6	2.2 NAME		ļ			
	ACCUSE OF THE PARTY OF THE PART			2.3 STREET ADDRESS			}	
STREET ADDRESS				2. 4 CITY-ST-ZIP				
CITY-ST-ZIP TITLE	TIODSON TE STOOT	DELETE	3.1 TITLE		ZIP	Change A	ddition	
NAME			3.2 NAME		1			
			3.2 NAME		Daras			
STREET ADDRESS)		}	
CITY-ST-ZIP		DELETE	3.4. CITY - ST- 4.1 TITLE		ZIP	Change A	ddition	
TITLE		L_ Descie	4.1 III.LE 4. 2 NAME		ŀ		GOILLOUI	
NAME			4. 2 NAME 4.3 SYREET ADDRESS				- 1	
STREET ADDRESS					· .		l	
CITY-ST-ZIP	<u> </u>	DELETE	4.4 CITY-ST-ZIP		ZIP PIL	☐ Change ☐ A	ddition	
TITLE		FT DEFEIR	5.1 TITLE		ļ	charge A	antinoli	
NAME			5.2 NAM			,	- 1	
STREET ADDRESS			5.3 STRE		1		}	
CITY - ST - ZIP			5.4 CITY	'-ST-2	1P	·		
TITLE		DELCTE					ddition	
,		DELETE	6.1 TITLE			☐ Change ☐ A	ddi <u>ti</u> on	
NAME		DELETE	6.2 NAM	fΕ		☐ Change ☐ A	ddition	
NAME STREET ADDRESS		☐ DELETE	6.2 NAM 6.3 STRE	fΕ	- 1	☐ Change ☐ A	ddition	

not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information ue and accurate and that my signature shalf have the same legal effect as if made under oath; that I am an owered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in