## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## P97000032958 DOCUMENT #

1. Entity Name

CREW QUARTERS, INC.



## **FILED** Jan 06, 2003 8:00 am Secretary of State 01-06-2003 90034 050 \*\*\*150.00

| of Business                                     |  | Mailing Ad   | dress  |   |   |   |   |   |  |  |  |
|---|--|--|--|---|---|---|---|---|--|--|--|
|   |  | 408 SE 18TH ST<br>FT LAUDERDALE FL 33316   |  |   |   | 69000791  |   |   |  |  |  |
| LE FL 33316                                     |  |  |  |   |   |   |   |   |  |  |  |
| ace of Busine                                   | ess  | 3. Mailing A   | Mailing Address  |   |   | 1   | \   | <b>38</b> 88 <b>00</b> 00 <b>00</b> 00 0                                |  |  |  |
| #, etc.   |  | Suite, Apt. #, etc.  |  |   |   | CHECK HERE IF MAKING CHANGES  |   |   |  |  |  |
| City & State                                    |  |  | City & State   |   |   | 4. FEI Number 65-0743106  |   |   |  | olied For<br>Applicable  |  |
| Zip Country                                     |  |  | Zip Country  |   |   | 5. Certificate of Status Desired  |   |   | \$8.75 Additional Fee Required                           |  |  |
| 6. Name and Address of Current Registered Agent |  |  |  |   |   | 7. Name   | e and Address of New                                    | Registered A  | gent   |  |  |
|   |  | <del>-</del>   | -  | Nam   | ne -  |   | -   |   |  |  |  |
|   |  |  | Street Address   |   |   | (P.O. Box Number is Not Acceptable)   |   |   |  |  |  |
| T LAUDERDALE FL 33316                           |  |  |  |   |   |   |   |   | 1 _ 2 .  |  |  |
|   |  |  |  |   |   |   |   | FL_   |  |  |  |
|   |  | for the purpose  | of changing its r  | egistered offic   | e or register   | red agent,  | or both, in the State of                                | Florida. I am f   | amiliar with, a  | and accept   |  |
| Signature, typed o                              | or printed name of registered ager   | nt and title if applicable   | e. (NOTE:  | Registered Agent s  | signature required  | d when reinstal   | ling)   | DATE  |  |  |  |
| LE NOW!!  | FEE IS \$150.00  |  |  |   |   |   | 9. Election Campaign                                    | Financing   | \$5.00   | <b>0</b> May Be  |  |
| After May 1, 2003 Fee will be \$550.00          |  |  |  |   |   |   | Trust Fund Contribu                                     | ition.  | Added  | to Fees  |  |
| · · uyusio io                                   |  |  |  | 11.   |   | ADDIT   | IONS/CHANGES TO O                                       | FFICERS AND   | DIRECTORS  | IN 11  |  |
| PRES  |  |  | ☐ Delete   | TITLE   |   |   |   |   | ☐ Change   | ☐ Addition   |  |
|   |  |  |  |   | ESS   |   |   |   |  |  |  |
|   |  |  |  | CITY-ST-ZIP   |   |   |   |   |  |  |  |
| VP  |  |  | ☐ Delete   | TITLE   |   |   |   |   | ☐ Change   | ☐ Addition   |  |
|   |  |  |  |   | FSS   |   |   |   |  |  |  |
|   |  |  |  | CITY-ST-ZIP   | 100   |   |   |   |  |  |  |
| 1101000   | HDITEL IL GOOTO  |  | ☐ Delete   | TITLE   | -   |   |   |   | ☐ Change   | Addition   |  |
|   |  |  |  | NAME  |   |   |   |   |  |  |  |
|   |  |  |  | STREET ADDR   | ESS   |   |   |   |  |  |  |
|   | *  |  | ☐ Delete   | TITLE   |   |   |   |   | Change   | Addition   |  |
|   |  |  |  | NAME  |   |   |   |   |  |  |  |
|   |  |  |  |   |   |   |   |   |  |  |  |
|   |  | <del> </del>   | □ Dolete   | -   |   |   | <del></del>   |   | ☐ Change   | ☐ Addition   |  |
|   |  |  | □ Delete   | NAME  |   |   |   |   |  |  |  |
|   |  |  |  |   | l l   |   |   |   |  |  |  |
|   | <del>=</del>   |  |  |   |   |   |   |   | Channe   | Addition   |  |
|   |  |  | ☐ Delete   | TITLE<br>NAMÉ   |   |   |   |   |  | ☐ ₩uninini   |  |
|   |  |  |  |   |   |   |   |   |  |  |  |
|   |  |  |  | STREET ADDR   | RESS  |   |   |   |  | \  |  |
|   | 6. Name  BEVERLY METH STREE  RDALE FL  named entity ons of registe  Signature, typed of  LE NOW!!!  May 1, 200 Payable to  PRES  DUPREE, 1  408 SE 18  FT LAUDE  VP  CRONEN, 408 SE 18 | Country  6. Name and Address of Curren  BEVERLY K  TH STREET  RDALE FL 33316  named entity submits this statement ons of registered agent.  Signature, typed or printed name of registered age  LE NOW!!! FEE IS \$150.00  May 1, 2003 Fee will be \$550.00  Payable to Florida Department  OFFICERS AN  PRES  DUPREE, LOUIS III  408 SE 18TH STREET  FT LAUDERDALE FL 33316 | ST 408 SE 18 FT LAUDE  LE FL 33316  ace of Business 3. Mailing / Ace of Business 3. Mailing / City & St  Country Zip  6. Name and Address of Current Registered Ace  BEVERLY K  TH STREET  RDALE FL 33316  named entity submits this statement for the purpose ons of registered agent.  Signature, typed or printed name of registered agent and title if applicable  LE NOW!!! FEE IS \$150.00  May 1, 2003 Fee will be \$550.00  Payable to Florida Department of State  OFFICERS AND DIRECTORS  PRES  DUPREE, LOUIS III  408 SE 18TH STREET  FT LAUDERDALE FL 33316  VP  CRONEN, BEVERLY K  408 SE 18TH ST | LE FL 33316  Country  City & State  Country  Zip  6. Name and Address of Current Registered Agent  BEVERLY K  TH STREET  RDALE FL 33316  The purpose of changing its one of registered agent and tille if applicable.  (NOTE LE NOW!!! FEE IS \$150.00  May 1, 2003 Fee will be \$550.00  Payable to Florida Department of State  OFFICERS AND DIRECTORS  PRES  DUPREE, LOUIS III  408 SE 18TH STREET  FT LAUDERDALE FL 33316  VP  CRONEN, BEVERLY K  408 SE 18TH ST  FT LAUDERDALE FL 33316 | ## does not state the purpose of changing its registered officions of registered agent and title if applicable (NOTE Registered Agent to Signature, typed or printed nerve of registered agent and title if applicable (NOTE Registered Agent to Signature, typed or printed nerve of registered agent and title if applicable (NOTE Registered Agent to Signature, typed or printed nerve of registered agent and title if applicable (NOTE Registered Agent to Signature, typed or printed nerve of registered agent and title if applicable (NOTE Registered Agent to Signature, typed or printed nerve of registered agent and title if applicable (NOTE Registered Agent to Signature, typed or printed nerve of registered agent and title if applicable (NOTE Registered Agent to Signature, typed or printed nerve of registered agent and title if applicable (NOTE Registered Agent to Signature, typed or printed nerve of registered agent and title if applicable (NOTE Registered Agent to Signature, typed or printed nerve of registered agent and title if applicable (NOTE Registered Agent to Signature, typed or printed nerve of registered agent and title if applicable (NOTE Registered Agent to Signature, typed or printed nerve of registered agent and title if applicable (NOTE Registered Agent to Signature, typed or printed nerve of registered agent and title if applicable (NOTE Registered Agent to Signature, typed or printed nerve of registered agent and title if applicable (NOTE Registered Agent to Signature, typed or printed nerve of registered agent and title if applicable (NOTE Registered Agent to Signature, typed or printed nerve of registered Agent to Signature, typed or printed nerve of registered Agent to Signature, typed or printed nerve of registered Agent to Signature, typed or printed nerve of registered Agent to Signature, typed or printed nerve of registered Agent to Signature, typed or printed nerve of registered Agent to Signature, typed or printed nerve of registered Agent to Signature, typed or printed nerve of registered Agent | ## A08 SE 18TH ST FT LAUDERDALE FL 33316  ## etc.    Suite, Apt. #, etc.   City & State   Country | ST FT LAUDERDALE FL 33316  LE FL 33316  ace of Business | ## Address of Business   3. Mailing Address   4. FEI Number   65-074310 | STEP 1. 33316  LE FL 33316  LE FL 33316  Subject Process | SET HANDERDALE FL 33316  LE FL 33316  Suite, Apt. #, citc.   Check Helpe IF Making CHANGES  B, citc.   Suite, Apt. #, citc.   Check Helpe IF Making CHANGES  B, citc.   Chy & State  Country   Zxp   Country   S. Certificate of Status Desired   Rea Required  Fee Required  6. Name and Address of Current Registered Agent   Name    Name   Street Address of New Registered Agent   Name    Street Address (RO. Box Number is Not Acceptable)  This TREET  RDALE FL 33316  City   FL   Zio Code  City   FL |  |

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:** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR