

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

FILED
May 19 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Wortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000080508 (9)
 1. Corporation Name
CRYSTAL WORLD MAINTENANCE AND SERVICES, INC.



Principal Place of Business 1019-B TERRY DRIVE WEST PALM BEACH FL 33411	Mailing Address 1019-B TERRY DRIVE WEST PALM BEACH FL 33411
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 LAKE TERRY DR	26 LAKE TERRY DR			09/16/1997	
22 Suite, Apt. #, etc. 1019-B	27 Suite, Apt. #, etc. 1019-B	4. FEI Number 65-0825952		Applied For Not Applicable	
23 City & State WPR/FL	28 City & State WPR/FL	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
24 Zip 33411	25 Country USA	29 Zip 33411		30 Country USA	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent			

KELLER, SILVIA KELLER PARA-LEGAL SVS INC 4480 CARVER STREET LAKE WORTH FL 33461		81 Name THE SAME
		82 Street Address (P.O. Box Number is Not Acceptable)
		83
		84 City FL
		85 Zip Code

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 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE SILVIA KELLER DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GONZALEZ, FRANCISCO	1.2 NAME	
STREET ADDRESS	1019-B TERRY DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL 33411	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GONZALEZ, LESLIE	2.2 NAME	
STREET ADDRESS	1019-B TERRY DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL 33411	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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] DATE **11-15-98** **1601688-0357**

CFR2034 (10/97)