

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000080508

FILED
Apr 20, 2005
Secretary of State

Entity Name: CRYSTAL WORLD MAINTENANCE AND SERVICES, INC.

Current Principal Place of Business:

202 MAPLEWOOD DR.
GREENACRES, FL 33415 US

New Principal Place of Business:

514 SHADY PINE WAY
APT D2
WEST PALM BEACH, FL 33415 US

Current Mailing Address:

202 MAPLEWOOD DR.
GREENACRES, FL 33415 US

New Mailing Address:

514 SHADY PINE WAY
APT D2
WEST PALM BEACH, FL 33415 US

FEI Number: 65-0825952

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GONZALEZ, MERCEDES
514 SHADY PINE WAY
APT D2
WEST PALM BEACH, FL 33415 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: GONZALEZ, LESLIE
Address: 514 SHADY PINE WAY D2
City-St-Zip: WEST PALM BEACH, FL 33415

Title: PD () Delete
Name: GONZALEZ, MERCEDES
Address: 514 SHADY PINE WAY D2
City-St-Zip: WEST PALM BEACH, FL 33415

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change () Addition
Name: GONZALEZ, LESLIE
Address: 514 SHADY PINE WAY D2
City-St-Zip: WEST PALM BEACH, FL 33415 US

Title: PD (X) Change () Addition
Name: GONZALEZ, MERCEDES
Address: 514 SHADY PINE WAY D2
City-St-Zip: WEST PALM BEACH, FL 33415 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LESLIE GONZALEZ

V

04/20/2005

Electronic Signature of Signing Officer or Director

Date