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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700082324

1. Corporation Name

CRESTVIEW C & A CORP.

Principal	Place	of E	Business

FILED May 08, 1999 8:00 am Secretary of State

05-08-1999 90075 039 ***150.00



Mailing Address					
7661 S.W 146 STREET MIAMI FL 33158		DO NOT WRITE IN THIS SPACE			
		3. Date Incorporated or Qualifed 09/23/1997			
Principal Place of Business 2a. Mailing Address		4. FEI Number	Applied For		
26		65-0786645	Not Applicable		
Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional		
City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip Co	ountry	This corporation owes the current year I Personal Property Tax.	Intangible		
25 29 30 9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
	81 Name				
GONZALEZ, JULIO J 7661 S.W 146 STREET MIAMI FL 33158		Street Address (P.O. Box Number is Not Acceptable)			
	83				
	84 City	F	85 Zip Code		
	7661 S.W 146 STREET MIAMI FL 33158 2a. Mailing Address 26	7661 S.W 146 STREET MIAMI FL 33158 2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29 30 rrent Registered Agent 81 Name 82 Street Add 83	7661 S.W 146 STREET MIAMI FL 33158 DO NOT WRITE IN TH 3. Date Incorporated or Qualifed 09/23/1997 2a. Mailing Address 26 Suite, Apt. #, etc. 5. Certifcate of Status Desired City & State City & State 7. Country 8. This corporation owes the current year in Personal Property Tax. Trent Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable)		

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.

agent. Fai	Il farmillar Willi, und decept the obligations of, besiter estimated, then	a cloidio+	
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re	egistered Agent signature requ	uired when reinstating) DATE
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	BAMEZ, O	1.2 NAME	
STREET ADDRESS	12601 SW 143 LN	1.3 STREET ADDRESS	
CTTY-ST-ZIP	MIAMI FL 33186	1.4 CITY- ST-ZIP	
TITLE	VSTD DELETE	2.1 TITLE	Change Addition
NAME	GONZALEZ, J	2.2 NAME	
STREET ADDRESS	7661 SW 146 ST	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33158	2.4 CITY-ST-ZIP	
TITLE	□ DELETE	3.1 TITLE	Change Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4. CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	Change Addition
NAME		4, 2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY+ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	Change Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADORESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	n Section 119 07/3\(\text{ii}\) Florida Statutes. I further cartify that the information

inerepy ceruity 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 of 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, with all other like empowered.

SIGNATURE:

JULIO J. GONZALEZ