2007 FOR PROFIT CORPORATION ··· ANNUAL REPORT

FILED Feb 02, 2007 08:00 AM Secretary of State

ANNUAL REPORT		Secretary of State
DOCUMENT # P98000017676 1. Entity Name C.R.H. INC.		Secretary of State
6653 POWERS AVENUE PC	iling Address D BOX 56071 CKSONVILLE, FL 32241	
JACKSONVILLE, FL 32217		
DO NOT WRITE IN	THIS SPACE	01242007 No Chg-P CR2E034 (11/05) 4. FEI Number
6. Name and Address of Current Regist	ered Agent	
PLEIMAN, THOMAS C CO 9471 BAY MEADOWS RD SUITE 308 JACKSONVILLE, FL 32256		DO NOT WRITE IN THIS SPACE
8. The above named entity submits this statement for the put the obligations of registered agent. SIGNATURE Signature, typed or printed name of regisfered agent and sitle if FILE NOWILL FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	applicable. (NOTE Registered Agent signalise require 9. Election Campaign Financing \$	ered agent, or both, in the State of Florida. I am familiar with, and accept ed when reinstating) DATE 5.00 May Be ided to Fees
10. OFFICERS AND DIREC	meš	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		U00000617407 02/07/07-80074-005 150.00 DO NOT WRITE IN THIS SPACE
12. I hereby certify that the information supplied with this fill indicated on this report or supplemental report if true a of the corporation or the receiver or trustee employered changed, or on an attachment with an address, with a SIGNATURE:	ling does not qualify for the exemptions contain and accurate and that my signature shall have the to execute this report as required by Chapter 6 other like empowered.	ed in Chapter 119, Florida Statutes, I further certify that the information e same legal effect as if made under oath; that I am an officer or director 07, Florida Statutes; and that my name appears in Block 10 or Block 11 if
SIGNATURE AND THE OR PRINTED	NAME OF SIGNING OFFICER OR DIRECTOR	Date Davime Phone #