2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 02, 2008 08:00 AN Secretary of State

	ANNUAL	. KEPOKI			-	9	Secret	arv	of Sta
DOCUMENT # P98000087535 1. Entity Name CRS MANAGEMENT CORP.								J	
Principal Plac	e of Business								
Principal Place of Business Mailing Addre 3700 COCONUT CREEK PKWY 3700 COCON			K PKWY						
#100 Coconut Creek, FL 33066		#100 Coconut Creek, FL 33066		 	P101 (011) 01() 57() 65()) 1875 1870 1885	ENER MIET EEF		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04302008	Chg-P	CR2E034	(12/06)	•	
City & State		City & State			4. FEI Number 65-0870			_ 	plied For t Applicable
Zip	Country	Zip	Countr		5. Certificate o	f Status Desired		8.75 Addi	
	6. Name and Address of Current	Registered Agent	J		7. Name and A	ddress of New R			·
		Name							
RUBINO, LEONARD 3700 COCONUT CREEK PKWY STE 100				Street Address (P.O. Box Number is Not Acceptable)					
COCONUT CREEK, FL 33066									
				City			FL	Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.									
SIGNATURE									
FIL After Ma	E NOWIII FEE IS \$150.00 ay 1, 2008 Fee will be \$550.	9. Election Campa Trust Fund Cor			.00 May Be ded to Fees				
10.	OFFICERS AND DIRECTORS				ADDITIONS/C	HANGES TO OFF			
TITLE	P Delete III					Haadaa)944031	Change	Addition
NAME STREET ADDRESS	RUBINO, LEONARD M RESS 3700 COCONUT CREEK PKWY- STE 130		NAM STRI	EET ADDRESS	05/29/08-80084-011 150.00			0.00	
City-St-zip	COCONUT CREEK, FL 33066		CITY	'-SI-ZIP					
TITLE	T CHIDING CHIDIG	☐ Delete	TITL					Change	☐ Addition
NAME STREET ADDRESS			NAM STRI	EET ADDRESS					
CITY-ST-ZIP				'-ST-ZIP					
TITLE	S	☐ Delete	TITL				[Change	☐ Addition
NAME STREET ADDRESS	RUBINO, STEPHEN . 3700 COCONUT CREEK PKWY		NAM CTD	IE EET ADDRESS					
CITY-ST-ZIP	COCONUT CREEK, FL 33066			'-SI-ZIP					
TITLE	·	☐ Delete	TITL	E			[Change	☐ Addition
NAME			NAM						
STREET ADDRESS CITY-ST-ZIP				EET ADDRESS (-ST-ZIP					
TITLE		Delete	TITL					Change	☐ Addition
NAME			NAM					_ •	
STREET ADDRESS				EET ADDRESS					
CITY-ST-ZIP		□ Delete	_	r-SI-ZIP			ſ	Change	Addition
TITLE NAME		☐ Delete	TITL				,		☐ Addition
STREET ADDRESS	•		SIR	EET ADDRESS	*				
CITY-ST-ZIP				'-ST-ZIP				····	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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 trystee 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 pither like empowered.									