

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 28, 2000 8:00 am
Secretary of State

08-28-2000 90033 039 ***550.00

00081412

DO NOT WRITE IN THIS SPACE

DOCUMENT # P99000017013

1. Entity Name
CRYSTAL CREATIONS, INC.

Principal Place of Business (NEW) Mailing Address

1301 N.W. 78 Avenue
Miami, FL 33126

2. Principal Place of Business
1301 N.W. 78 Avenue

Suite, Apt. #, etc.

3. Mailing Address
same

Suite, Apt. #, etc.

City & State
Miami, FL

City & State

4. FEI Number
65-0917528

Applied For
Not Applicable

Zip
33126

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Yvette Barreto
7001 N. Waterway Drive
Suite 108
Miami, FL 33155

Name
J. Luis Quintana
Street Address (P.O. Box Number is Not Acceptable)
338 Minorca Avenue

City
Coral Gables **FL** Zip Code
33134

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.

SIGNATURE

Signature, typed or printed, name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P	Yvette Barreto <input type="checkbox"/> Delete NAME 1301 N.W. 78 Avenue STREET ADDRESS Miami, FL 33126 CITY-ST-ZIP	TITLE VP	Juan Carlos Barreto <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition NAME 1301 N.W. 78 Avenue STREET ADDRESS Miami, FL 33126 CITY-ST-ZIP
TITLE	<input type="checkbox"/> Delete	TITLE D	J. Luis Quintana <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition NAME 338 Minorca Avenue STREET ADDRESS Coral Gables, FL 33134 CITY-ST-ZIP
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)