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PROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE. Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996 **DOCUMENT #**

1. Corporation Name

S49997

(7)

CR CONSULTING, INC.

Principal Place of Business TWO ALHAMBRA PLAZA PENTHOUSE II CORAL GABLES FL 33134 2. Principal Place of Business 2. Mailing Address 2. Principal Place of Business 3. Date Incorporated or Quarked 3. Date Incorporated or Qu
PENTHOUSE II CORAL GABLES FL 33134 PENTHOUSE II CORAL GABLES FL 33134 2. Principal Place of Business 2a. Melling Address 2b 3c 5c 5c 5c 5c 5c 5c 5c
Surfamental Piaco of Business Za. Mailing Address A. FEI Number Applied For
Suite, Apt. #, etc. Suite, Ap
Suite, Apt. #, etc. Suite, Apt. #, etc. 27 Suite, Apt. #, etc. 28
Section Sect
Zp Country Zp Country
Zip Country Zip Country Zip Country Sign R. This corporation has liability for intangible tax under s 199.032, Florida Statutes
BEFELER, HENRY TWO ALHAMBRA PLAZA PENTHOUSE II CORAL GABLES FL 33134 11. Pursuant to the provisions or Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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. SIGNATURE Signature typed or printed name of registered agent and lifes if applications. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 11. Itilit CODINA, ARMANDO DIRECTORS IN 12. 11. Itilit CODINA, ARMANDO TWO ALHAMBRA PLAZA PH II 1.3 STREEL ADDRESS CITY-SI-2P CORAL GABLES FL 1.4 CITY-SI-2P 1.10 DELETE 1.1 TITLE DONAL GABLES FL 1.4 CITY-SI-
BEFELER, HENRY TWO ALHAMBRA PLAZA PENTHOUSE II CORAL GABLES FL 33134 83 City FL 85 City Code 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 agent, and accept the obligations of, Sections 607.0505, Florida Statutes. SIGNATURE Signature based or pretid name of registered agent and this if aprilicable Florida Statutes Florida City Florida City Florida Florida Statutes Florida City Florida Statutes Florida Statutes Florida City Florida Statutes Florida City Florida City Florida City Florida Florida Statutes Florida Statutes Florida City Florida Statutes Florida Statu
TWO ALHAMBRA PLAZA PENTHOUSE II CORAL GABLES FL 33134 84 City FL 85 Zip Code 11. Pursuant to the provisions or Sections 607.0502 and 607.1508, Florida Statutes, the abovenamed 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. SIGNATURE Signature bysed or printed name of registered agent and life if applicable PLETE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Intle CODINA, ARMANDO 12 NAME CODINA, ARMANDO 12 NAME CORAL GABLES FL 14. CITY-SI-ZIP TITLE PD DELETE 21 TITLE CORAL GABLES FL 14. CITY-SI-ZIP TITLE CORAL GABLES FL 17. SI-ZIP TITLE VIS DELETE 3 1. TITLE CORAL GABLES FL 14. CITY-SI-ZIP TITLE VIS DELETE 3 1. TITLE CORAL GABLES FL 14. CITY-SI-ZIP TITLE VIS DELETE 3 1. TITLE CORAL GABLES FL 14. CITY-SI-ZIP TITLE CORAL GABLES FL 15. TITLE CORAL GABLES FL 16. CORAL GABLES FL 17. SI-ZIP TITLE CORAL GABLES FL 17. CORAL GABLES FL 17. SI-ZIP TITLE CORAL GABLES FL 17. GABLES CITY-SI-ZIP TITLE CORAL GABLES FL 17. GABLES CITY-SI-ZIP TITLE CORAL GABLES CORAL GABL
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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 607.0506, Florida Statutes. Signature Sign
Title
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TWO ALHAMBRA PLAZA PH II 1.3 STREET ADDRESS CORAL GABLES FL 1.4 CITY-ST-ZIP CORAL GABLES FL 1.4 CITY-ST-ZIP Change Addition A
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NAME BEFELER, HENRY 32 NAME
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TILE DELETE 6 1 TITLE Change Addition
NAME 62 NAME
STREET ADDRESS 63 STREET ADDRESS
CITY-ST-ZIP - 64 CITY-ST-ZIP
14. I do hereby cert fy that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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

cating 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: __

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-15-96 (305)520-2300