2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 27, 2007 08:00 A Secretary of State

	ANNUAL	REPORT			1101	Secretary of Sta
1. Entity Nam	MENT # V29281 CROSSING INTERNATION			ĸ.	secretary of Sta	
Principal Place of Business 2420 NORTHEAST 32ND COURT LIGHTHOUSE POINTE, FL 33064		Mailing Address 2420 NORTHEAST 32ND COURT LIGHTHOUSE POINTE, FL 33064		.	DFO ININO FIORI INIOI FIOI	BIBLY BUGY BIBLY BUGY BUGU BUGUBY JF 1881
	O NOT WRITE	IN THIS SDA	N THIS SPACE		No Chg-P	CR2E034 (11/05)
				4. FEI Number 65-0346 5. Certificate of		Applied For Not Applicable \$8.75 Additional
	6. Name and Address of Current Re	gistered Agent				Fee Required
ROMANO, ANNETTE 2420 NORTHEAST 32ND COURT LIGHTHOUSE POINTE, FL 33064 IN TH 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the obligations of registered agent.						The second of th
SIGNATURE Signature: typed or printed name of registered agent and title if applicable (NOTE Registered Agent aignature required when reinstating) DATE						
FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campa Trust Fund Cont				.00 May Be ed to Fees		
10.	OFFICERS AND DI	RECTORS	- Image tgitu t	ļ, . l		
TITLE NAME	D ROMANO, ANNETTE				iku ang	
STREET ADDRESS	2420 N.E. 32ND COURT				14.1 (19.19)	
CITY-ST-ZIP	LIGHTHOUSE POINTE, FL		44	.43	LIDO	000000000
TITLE NAME STREET ADDRESS CITY-ST-ZIP					05/11/	000737718 07-80039-016 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT W	RITE
TITLE NAME STREET ADDRESS CITY-SI-ZIP	, ,			IN T	HIS SP	ACE
TITLE		1				

12. Thereby 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 trustee 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 other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

ANNETTE ROMAND

04 03 07

(954) 941-7608

Daytima Phone #