## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED May 03, 2004 8:00 am Secretary of State

DOCU!  1. Entity Name CR PLAS		11 / 12 / 12 / 12 / 12 / 12 / 12 / 12 /			31.   K 		90442 037 ***:	
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Principal Place 2703 SW 141 DEERFIELD B	TH DR. JEACH? FÍX 334421. TO TO STEVIENT	Mailing Address	33442 57 1-25	n. 171 171 Int	rej udi udi Siidhaani	e ee ee Taalaan malihiidaan	Jidh eldin albin dibin dibin dibir a	ITBIERRA II IRBI
2. Principal Pl	lace of Business	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01092004	Chg-P	CR2E034 (10/03	1)	
City & State		City & State		4. FEI Number 65-0353		<del></del>	Applied For Not Applicable	
Zip	Country	Zip	Country		5. Certificate o	f Status Desired	\$8.75 A	dditional ired
	6. Name and Address of Current I	Registered Agent			7. Name and A	ddress of New Re	gistered Agent	
		The second district on the second state and the second state of th	Name		- 1		e Transpirent Term many 43 fg	
GOLDSTEIN , DONNA 2703 S.W. 14TH DR. DEERFIELD BEACH. FL 33442			Street A	Street Address (P.O. Box Number is Not Acceptable)				
DECKTIEL	.b beach, 1 E 33442							
			City	• 4	e)	te di tanà	FL Zip,Co	ode
	named entity submits this statement for ions of registered agent.	r the purpose of changing its r	egistered office of	r.register	ed agent, or both	in the State of Flor	ida. I am familiar wit	h, and accept
SIGNATURE_	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE:	Registered Agent signs	ture required	when reinstating)		DATE	· ·
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.0				.00 May Be ed to Fees	* * * * * * * * * * * * * * * * * * *	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
10.	. OFFICERS AND	DIRECTORS	11.*	+ 3t <sub>1</sub>	ADDITIONS/C	HANGES TO OFFI	CERS AND DIRECTO	RS IN 11
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12. I hereby of indicated	certify that the information supplied with on this report or supplemental report is	this filing does not qualify for true and accurate and that m	the exemption sta y signature shall	ited in Se have the	ection 119.07(3)(i) same legal effect	Florida Statutes. I as if made under o	further certify that the ath; that I am an offic	e information er or director

of the corporation of the receiver of trustee em	ipowered to execute this report as r	required by Chapter 607, Florida Sta	atutes; and that my name appears i	n Block 10 of Block 11 it
changed, or on an attachment with an address	s, with all other like empowered.			
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