

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V66887

1. Entity Name

CRYSTAL INN CO.

Principal Place of Business

2000 JEFFERSON DAVIS HWY.  
ARLINGTON VA 22202  
US

Mailing Address

270 NE 4TH ST  
STE 100  
MIAMI FL 33132-2210  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0361911

Applied For  
Not Applicable

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

CORPORATION COMPANY OF MIAMI  
201 S BISCAYNE BLVD  
1600 MIAMI CENTER  
MIAMI FL 33131

Name C T Corporation System

Street Address (P.O. Box Number is Not Acceptable)

1200 S. Pine Island Road

City Plantation FL Zip Code 33324

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 *Vicky Goldstein*

VICKY GOLDSTEIN

SPECIAL ASSISTANT SECRETARY

3-7-00

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 V ☐ Delete  
NAME CORBEDDU, ANTONIO  
STREET ADDRESS 270 NE 4TH ST  
CITY-ST-ZIP MIAMI FL 33132

TITLE V ☐ Change ☒ Addition  
NAME Castera, Benoist  
STREET ADDRESS 270 N.E. 4th Street  
CITY-ST-ZIP Miami, FL 33132

TITLE VD ☐ Delete  
NAME MICANGELI, MAURIZIO  
STREET ADDRESS 270 NE 4TH ST  
CITY-ST-ZIP MIAMI FL 33132

TITLE ☐ Change ☐ Addition  
NAME ☐ Change ☐ Addition  
STREET ADDRESS ☐ Change ☐ Addition  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE PD ☐ Delete  
NAME TUPINI, CLAUDIO  
STREET ADDRESS 270 NE 4TH ST  
CITY-ST-ZIP MIAMI FL 33132

TITLE ☐ Change ☐ Addition  
NAME ☐ Change ☐ Addition  
STREET ADDRESS ☐ Change ☐ Addition  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D ☒ Delete  
NAME DAYTON, M.L.  
STREET ADDRESS 270 NE 4TH ST.  
CITY-ST-ZIP MIAMI FL 33132

TITLE ☐ Change ☐ Addition  
NAME ☐ Change ☐ Addition  
STREET ADDRESS ☐ Change ☐ Addition  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D ☐ Delete  
NAME FRIEDBAUER, ROGER  
STREET ADDRESS 1500 MIAMI CENTER, 201 S. BISCAYNE BLVD.  
CITY-ST-ZIP MIAMI FL 33132

TITLE ☐ Change ☐ Addition  
NAME ☐ Change ☐ Addition  
STREET ADDRESS ☐ Change ☐ Addition  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D ☐ Delete  
NAME LAROCHE, RICHARD F JR.  
STREET ADDRESS 270 NE 4TH STREET  
CITY-ST-ZIP MIAMI FL 33132

TITLE ☐ Change ☐ Addition  
NAME ☐ Change ☐ Addition  
STREET ADDRESS ☐ Change ☐ Addition  
CITY-ST-ZIP ☐ Change ☐ 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

Benoist Castera 02-25-00 305-358-0661

Date

Daytime Phone #

FILED

00 MAR -8 PM 2:02

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

CR2E034 (9/99)