

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000066791

Entity Name: CRYSTAL FLORIDA INC.**Current Principal Place of Business:**1757 DOGWOOD DR.
MARCO ISLAND, FL 34145**Current Mailing Address:**1757 DOGWOOD DR.
MARCO ISLAND, FL 34145 US**FEI Number:** 68-0515198**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ARAT, ENGIN
1757 DOGWOOD DR.
MARCO ISLAND, FL 34145 US*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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	V
Name	BADEMLI, MUNIP
Address	1014 MANATEE ROAD F103
City-State-Zip:	NAPLES FL 34114

Title	P
Name	ARAT, ENGIN
Address	1757 DOGWOOD DR.
City-State-Zip:	MARCO ISLAND FL 34145

Title	V
Name	ARAT, BURCAK
Address	1757 DOGWOOD DR.
City-State-Zip:	MARCO ISLAND FL 34145

Title	V
Name	BADEMLI, BERK
Address	18121 ROYAL HAMMOCK BLVD
City-State-Zip:	NAPLES FL 34114

Title	T
Name	BADEMLI, ULKU F
Address	1014 MANATEE ROAD F103
City-State-Zip:	NAPLES FL 34114

Title	S
Name	BADEMLI, JENNIFER
Address	18121 ROYAL HAMMOCK BLVD
City-State-Zip:	NAPLES FL 34114

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: ENGIN ARAT

P

01/10/2020

Electronic Signature of Signing Officer/Director Detail_____
Date