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CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H74915

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KRETZER PIANO AND ORGAN COMPANY, INC.

FILED Apr 28 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 1973 N. MILITARY TRAIL 1373 N. MILITARY TRAIL WEST PALM BEACH FL 33409 WEST PALM BEACH FL 33409 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/06/1985 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For **NOT APPLICABLE** 26 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5,00 May Be 23 Trust Fund Contribution Added to Fees Zip Country Country This corporation owes or has paid the current year Intangible 24 25 30 Personal Property Tax due June 30. Yes ☐ No 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KRETZER, KATHLEEN SUE 1242 BARNSTAPLE CIR Street Address (P.O. Box Number is Not Acceptable) 82 WEST PALM BEACH FL 33414 83 84 City Zip 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 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, typed or ponted name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition 1.1 TITLE TITLE KRETZER, KATHI 1.2 NAME NAME 1242 BARNSTAPLE CIR STREET ADORESS 1.3 STREET ADDRESS W PALM BEACH FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 21 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - 7IP 4.4 CITY - ST- ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6 1 TITLE Change Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE: