## FILED Apr 07, 1999 8:00 am Secretary of State PR⊘FITجَرَيَةِ FLORIDA DEPARTMENT OF STATE CORPORATION Katherine Harris ANNUAL REPORT Secretary of State 04-07-1999 90047 016 \*\*\*150.00 **DIVISION OF CORPORATIONS** 1999 **DOCUMENT # J92258** KRAUSS CO. OF FLORIDA Mailing Address Principal Place of Business 6110 126TH AVE N 6110 126TH AVE N . . LARGO FL 34643 LARGO FL 34643 DO NOT WRITE IN THIS SPACE US 3. Date incorporated or Qualifed 09/09/1987 Applied For 2a -Mailing Address 4.=FEI:Number.= 2. Principal Place of Business 59-2845908 Not Applicable 26 \$8.75 Additional Sulte, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be Election Campaign Financing City & State City & State \_-Trust Fund Contribution Added to Fees Country 8. This corporation owes the current year Intangible Country Zip ☐ Yes □ No 30 Personal Property Tax. 29 25 24 gistered Agent Name and Address of Name and Address of Current Registered Agent 81 KIRK, CAROL A. 82 6110 126TH AVE. N **LARGO FL 34643** 83 City LARGO #5 607.0502 and 607.1508, Floride Statutes, the above-named corporation submits this statement for the purpose of changing the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as the obligations of pecifon 607.0505, Florida Statutes. SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFIGERS AND DIRECTORS 13. 12:---☐ Change Addition DELETE **CR2E034** KERNER, JOHN E. NAME 141 WILLIAM RICHMOND 1.3 STREET ADDRESS STREET ADDRESS WILLIAMSBURG VA 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ DELETE 2.1 TITLE mle 2.2 NAME NAME KIRK, CAROL A. 126th auc 2.3 STREET ADDRESS 6110 126TH AVE NORTH STREET ADDRESS LARGO FL 2.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 31 TD F TIME 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CTTY-ST-ZIP Addition DELETE A.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change DELETE 5.1 TTLE TILE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-5T-ZIP CITY-ST-ZIP Addition 6.1 TITLE ☐ Change DELETE TILE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 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 en officer or director of the corporation or the receiper 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, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP