

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000071322

Entity Name: KRUPS, INC

FILED
May 01, 2005
Secretary of State

Current Principal Place of Business:

6285 US HWY 301 N
ELLENTON, FL 34222

New Principal Place of Business:

Current Mailing Address:

6285 US HWY 301 N
ELLENTON, FL 34222

New Mailing Address:

FEI Number: 37-1469599

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATEL, PARESH
5207 HWY 19 NORTH
PALMETTO, FL 34221 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PATEL, MUKUND M
Address: 5207 HWY 19 N
City-St-Zip: PALMETTO, FL 34221

Title: VP () Delete
Name: PATEL, PARESH
Address: 5207 HWY 19 N
City-St-Zip: PALMETTO, FL 34221

Title: SEC () Delete
Name: PATEL, KAMINI M
Address: 5207 HWY 19 N
City-St-Zip: PALMETTO, FL 34221

Title: TRES () Delete
Name: PATEL, DIPTI
Address: 5207 HWY 19 N
City-St-Zip: PALMETTO, FL 34221

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: MUKUND M PATEL

P

05/01/2005

Electronic Signature of Signing Officer or Director

Date