

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 209045

1. Corporation Name
THE KRAUSS GROUP, INC.

Principal Place of Business

715 N SHERRILL STREET
P O BOX 23943
TAMPA FL 33609
US

Mailing Address

~~5245 W. LAUREL ST. #200~~
P O BOX 23943
TAMPA FL 33623
US

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

KRAUSS, ELMER J
715 N SHERRILL STREET
TAMPA FL 33609

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/14/1958

4. FEI Number

59-0832794

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

Yes No

10. Name and Address of New Registered Agent

81. Name

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

83.

84. City

FL

85. 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 printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE S
NAME MOORE, CHARLENE D
STREET ADDRESS 715 N SHERRILL STREET
CITY-ST-ZIP TAMPA FL

TITLE PCD
NAME KRAUSS, ELMER J
STREET ADDRESS 715 N SHERRILL STREET
CITY-ST-ZIP TAMPA FL 33609

TITLE T
NAME SLATTER, MARY E.
STREET ADDRESS 715 N SHERRILL STREET
CITY-ST-ZIP TAMPA FL

TITLE V
NAME SIRIANI, ANDREW T
STREET ADDRESS 715 N SHERRILL STREET
CITY-ST-ZIP TAMPA FL

TITLE D
NAME MILLER, VIRGINIA R.
STREET ADDRESS 715 N. SHERRILL STREET
CITY-ST-ZIP TAMPA FL 33609

TITLE D
NAME MILLER, LAWRENCE J.
STREET ADDRESS 715 N. SHERRILL STREET
CITY-ST-ZIP TAMPA FL 33609

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/10/99 813-289-3180

Date

Daytime Phone #

CR2E034 (1/198)

0401204