## 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 # 401505

GEORGE KRUMHOLZ, INC.

**FILED** Feb 10, 1999 8:00am **Secretary of State** 

02-10-1999 90039 009 \*\*\*150.00

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·					<u> </u>	]  <b>     </b>			
Principal Place of Business Mailing Address									
4 NE 1ST AVE	E STE 614	169 E FLAGLER ST							
IIAMI FL 33132 823						DO NOT WRITE IN THIS SPACE			
MIAMI FL 33131			!			3. Date Incorporated or Qualifed			
		US				05/19/1972			
o Dula dia alia	lone of Rusiness	2a. Mailing Address				4. FEI Number	T Ap	plied For	
- Thirties at the second at th						59-1397490	<del> </del>	t Applicable	
26							\$8.75		
Solite, 7-pt. 7-j etc.						5. Certifcate of Status Desired	Fee Re		
City & State City & State			·			6. Election Campaign Financing	\$5.00	May Be	
Sity a state						Trust Fund Contribution	Added	•	
Zip Country Zip			Country			8. This corporation owes the current year	Intangible		
Zip ∃	25	29 30	7	•		Personal Property Tax.	Yes	□No	
<u> </u>	9. Name and Address of Current		١			10. Name and Address of New Register	ed Agent		
	3. Name and Address of Callen			81	Name				
KRU	IMHOLZ, GEORGE				51 11	(D.O. Bay Number in Not Acceptable)			
	E FLAGLER ST			82	Street Add	dress (P.O. Box Number is Not Acceptable)			
•				83		12.1.15亿元(12.1.12.1.12.1.13.1.13.1.13.1.13.1.13.1			
823 . MIAMI FL 33131						The Arthrell are and the fire of		5 55, 115H 1871	
MIMMIFL SOLUT				84	City	2 T	85 Zip	Code ** '**'	
<u> </u>	(0, 1) - 07.050	2 and 607 1509 Elected Statutes	the al	hove.	-named cor	poration submits this statement for the purpose	of changing its	registered	
						tion's board of directors. I hereby accept the ap	pointment as re	gistered	
agent. I a	am familiar with, and accept the obligat	ions of, Section 607.0505, Florida	Statu	utes.	-	·			
SIGNATURE	7					red when reinstating) DATE			
	Signature, typed or printed name of registered agen		_	Agent	signature requi	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	DRS IN 12	
12.	OFFICERS AN	D DIRECTORS	13.	n e	<del></del>		☐ Change	Addition	
TITLE	P	☐ DEFEIC	1.1 TI				0-	_	
NAME	KRUMHOLZ,GEORGE		1.2 N						
STREET ADDRESS	1450 S.E. DATOHORE DRIVE		1.3 STREET ADDRESS						
CITY-ST-ZIP	MIAMI FL		1.4 CITY- 2.1 TITLE		-ZIP		Change	☐ Addition	
TITLE	T.	☐ DELETE	2.1 HILE 2.2 NAME					, ·	
NAME	KRUMHOLZ,HANNAH M.	i	2.2 N/	AME					
STREET ADDRESS	1430 S.E. BAYSHORE DRIVE		2.3 \$1	TREET	ADDRESS				
CITY-ST-ZIP	MIAMI FL		2.4 C	TY-ST	Γ-ZIP		F124	Addition	
TITLE		☐ DELETE	3.1 TI	TLE		•	Change	☐ Addition	
NAME *			3.2 N	AME					
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NAME .		4		<b>IAME</b>					
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			5.3 S 5.4 C 6.1 TI 6.2 N	TREET TY-ST TILE IAME	r-ZIP		☐ Change	Addition	
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TITLE NAME			5.3 S 5.4 C 6.1 TI 6.2 N 6.3 S	TREET TY-ST TILE IAME	T-ZIP  TADORESS  T-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, with all other like empowered.

SIGNATURE: