2001 UNIFORM BUSINESS REPORT (UBI

DOCUMENT # 522167

FILED Aug 08, 2001 8:00 am Secretary of State

PRAMER CORPORATION					08-08-2001 90004 027 ***550.00			
Principal Place of Business 6206 ROYAL POINCIANA LANE FORT LAUDERDALE FL 33319		Mailing Address 6206 ROYAL POINCIANA LANE FORT LAUDERDALE FL 33319		-		ráar ardir Achri Bib		; 1 6(5() (98)
2. Principal F	Place of Business	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE			
City & State		City & State	City & State		59-1743726		_	lied For Applicable
Zip	Country	Zíp	Country	5. (Certificate of Status Desired		75 Additi	
	6. Name and Address of Curre	nt Registered Agent		7. 1	Name and Address of New Re	gistered Agen	1	
O'NEIL, DONNA S ESQ 301 E COMMERICAL BLVD				Name Street Address (P.O. Box Number is Not Acceptable)				
FT LAUDERDALE FL 33334			ļ	-				
!	<i>t.</i>		City			FL] Z	Zip Code	
SIGNATURE	Signature, typed or printed name of registered agoration is eligible to satisfy its Intangirequirement and elects to do so.	ent and title if applicable. (NO	TE: Registered Agent signs	ature required when re	einstating) 10. Election Campaign Fina	DATE		May Be
			ble to Departme	nt of State	Trust Fund Contribution		Added to	
11.		ND DIRECTORS	12.	AD	DITIONS/CHANGES TO OFFIC			
NAME STREET ADDRESS CITY-ST-ZIP	P SKRILL, HENRY 6206 ROYAL POINCIANA LANE FT LAUDERDALE FL 33319	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	Addition Services
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SKRILL, HENRY 6206 ROYAL POINCIANA FT LAUDERDALE FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	Delete				ا سالهمستين اس ته چهيد	<u>.</u> (Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		,		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Ç	☐ Defete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	Addition
indicated	Learning that the information supplied was certify that the information supplied was a certify that the information or the receiver or trustee en	t is true and accurate and that	my signature shall	have the same	legal effect as if made under or	ath; that I am ar	n officer o	r director