

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Martinez
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY -1 11 4:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 545110

(9)

1. Corporation Name

KRAZIES KUSTOM EMPORIUM, INC.

Principal Place of Business

Mailing Address

**9804 SPANISH ISLES DRIVE
BOCA RATON FL 33496-1830**

**9804 SPANISH ISLES DRIVE
BOCA RATON FL 33496-1830**

DO NOT WRITE IN THIS SPACE

3. Date of Registration or Reinstatement

09/13/1977

3a. Date of Last Report

04/06/1994

2. Principal Place of Business

2a. Mailing Address

21. State, Apt. #, etc.

25. State, Apt. #, etc.

22. City & State

27. City & State

23. ZIP

24. County

28. ZIP

29. County

30. City

4. FEI Number

59-1764029

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 has liability for interpreting tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CULLON, ROBERT E
9804 SPANISH ISLES DRIVE
BOCA RATON, FLORIDA
33433**

81. Name

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

83. City

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.060, 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 607.0605, Florida Statutes.

SIGNATURE

Signature of Agent or person authorized to register agent and file this statement

Signature of Registered Agent or person authorized to register agent and file this statement

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	S
NAME	CULLOM, JEWELL A
STREET ADDRESS	3570 S OCEAN BLVD
CITY, ST, ZIP	PALM BCH, FL 00000
TITLE	P
NAME	CULLOM, ROBERT E
STREET ADDRESS	9804 SPANISH ISLES DR
CITY, ST, ZIP	BOCA RATON, FL 00000
TITLE	T
NAME	CULLOM, MARTHA I
STREET ADDRESS	9804 SPANISH ISLES DR
CITY, ST, ZIP	BOCA RATON, FL 00000
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY, ST, ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not equally for the exemption stated in Section 119.07(3)(b), 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 a director of the corporation or the agent or trustee designated 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.

SIGNATURE:

MARTHA CULLOM *4/1/95* *407-243-9666*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morhart
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
7/10/95

5/1/95 3:57

RECEIVED STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 546956 (4)

LE-GALS, INCORPORATED

1. Principal Office of Incorporation 10191 W SAMPLE ROAD STE 211-A CORAL SPRINGS FL 33065 US		2a. Mailing Address 10191 W SAMPLE RD STE 211-A CORAL SPRINGS FL 33065 US		3. Date of Report Due 08/24/1977		3a. Date of Last Report 04/19/1994	
2. Principal Place of Business 21		2a. Mailing Address 26		4. FID Number 59-1758686		Applied for ☐ Not Applicable	
22		27		5. Certificate of Status, Deemed ☐		\$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24		25		29		30	
26		27		28		29	

9. Name and Address of Current Registered Agent SEIGLER, LISA 9178 N.W. 50TH COURT CORAL SPRINGS FL 33067				10. Name and Address of New Registered Agent			
81 Name				82 Street Address (P.O. Box, Night Office, Not Applicable)			
83				84 City			
85 FL				86 Zip Code			

11. The undersigned, in compliance with Sections 607.04(2) and 607.1508, Florida Statutes, the above named corporation certifies this statement for the purpose of changing its registered office as set forth herein. Such change was authorized by the corporation's board of directors, and hereby accepted this appointment as registered agent. I am hereby accepting the responsibility of Section 607.1509, Florida Statutes.

Signature of Agent: _____ Date: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
NAME	PD SEIGLER, LISA	1. NAME	☐ Change ☐ Addition
ADDRESS	9178 N.W. 50TH COURT	2. NAME	
CITY	CORAL SPRINGS FL	3. NAME	
ST	ST	4. NAME	☐ Change ☐ Addition
NAME	SEIGLER, JAMES M	5. NAME	
ADDRESS	9178 N.W. 50TH COURT	6. NAME	
CITY	CORAL SPRINGS FL	7. NAME	
ST		8. NAME	☐ Change ☐ Addition
NAME		9. NAME	
ADDRESS		10. NAME	
CITY		11. NAME	
ST		12. NAME	☐ Change ☐ Addition
NAME		13. NAME	
ADDRESS		14. NAME	
CITY		15. NAME	
ST		16. NAME	☐ Change ☐ Addition
NAME		17. NAME	
ADDRESS		18. NAME	
CITY		19. NAME	
ST		20. NAME	

14. I, the undersigned, certify that the information supplied in this filing is substantially true and correct, and that I am duly qualified to act as the registered agent for the corporation. I further certify that the information included in this annual report is true and correct, and that my separate filing of the same report after the filing of this report is required by Florida Statutes, and that my name appears in Block 12 of this filing as an officer or director of the corporation.

SIGNATURE: *Lisa Seigler*
LISA SEIGLER
5/1/95 308/752-0440