

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED
Aug 04 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 554606

(4)

1. Corporation Name

KRAFT HOLDINGS, INC.

Principal Place of Business

13607 NW 50TH AVE
GAINESVILLE FL 32606
US

Mailing Address

13607 NW 50TH AVE
GAINESVILLE FL 32606
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/24/1977

3a. Date of Last Report

01/25/1996

4. FEI Number

59-1793918

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☒

\$5.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

23. City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27. City & State

27

Zip

Country

29

30

9. Name and Address of Current Registered Agent

KRAFT, RUDOLPH A.
13607 NW 50TH AVE
GAINESVILLE FL 32606

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 of registered agent and fee, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

7-23-97

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
KRAFT, ERIC B.
STREET ADDRESS
7313 S.W. 105TH AVE
CITY-ST-ZIP
GAINESVILLE FL

TITLE ☐ DELETE

NAME
KRAFT, R.A.
STREET ADDRESS
13607 NW 50TH AVE
CITY-ST-ZIP
GAINESVILLE FL

TITLE ☐ DELETE

NAME
KRAFT, MARGARET A.
STREET ADDRESS
13607 NW 50TH AVE
CITY-ST-ZIP
GAINESVILLE FL

TITLE ☐ DELETE

NAME
KRAFT, CHRISTOPHER L.
STREET ADDRESS
13100 NW 50TH AVENUE
CITY-ST-ZIP
GAINESVILLE FL

TITLE ☐ DELETE

NAME
KRAFT, PETER D.
STREET ADDRESS
13414 N.W. 19TH PLACE
CITY-ST-ZIP
GAINESVILLE FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this report 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 registered 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.

CR2E034 (4/97)