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

PROFIT **CORPORATION ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

606354

(9)

KARERT, INC.

FILED	
Apr 17 1998 8:00am	1
Secretary of State	

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	TWOLIT	,, 1140.														
Principal Place of Business Mailing Address											I ANDRO DELLE COLLEGENDO ESTOS DI	ij bibi bibil debi				
4290 BEE RIDGE RD. SARASOTA FL 34233 US					7137 N SERENOA DR SARASOTA FL 34241-9271 US					DO NOT WRITE IN THIS SPACE						
										3.	Date Incorporated or Qualific 01/11/1979	ed				
2.	2. Principal Place of Business				2a. Mailing Address					4.	FEI Number			Αp	plied	For
21				26	26						59-1877298			Not Applicable		
	Suite, Apt. #, etc.				Suite, Apt. #, etc.					5.	. Certificate of Status Desired			.75		
22	City B Cross			27	27					 - -				ee Re		
23	City & State	3			City & State					6.	 Election Campaign Financing Trust Fund Contribution 		-	5.00		
23	Zip Country			28	Zip Count					+	This corporation owes or has	naid the ou		dded t		
24	-,		26	29	,	30	າ ໌	•		•.	Personal Property Tax due J		Yes		No	VIE
		9. Name	and Address of C		stered Agent					10.	Name and Address of New	Registered	Agent		4	
	SCI	HROEDER,	ROBERT				61	١	lame	-						
7137 N. SERENOA DR SARASOTA FL 34326							82	5	treet Addr	ess (F	P.O. Box Number is Not Accep	otable)				
	5AI	KASUIA F	L 34320				83	1								
							84	(City	_		FI	85	Zip (Code	
11. Sid	office or re agent. I ar SNATURE	e giste red ag mi fa miliar wi	ions of Sections 60 gent, or both, in the ith, and accept the	State of Flor obligations of	ida. Such change of, Section 607.050	was auth 05, Florida	iorized by a Statute	y th	amed corp e corporati	on's l	on submits this statement for it board of directors. I hereby ac o reinstating)	ne purpose o cept the app	f chan pointme	ging it: ent as	s regi regist	istered tered
12			OFFICER	S AND DIRE	CTORS		13.				ADDITIONS/CHANGES TO O	FICERS AND	DIRE	CTOR	SIN	12
TITE	Æ	DVS			DELET	E	1.1 TITLE						C	nange		Addition
NA	WE I		eder, karen l				1.2 NAME		i							
STA	EET ADDRESS		SERENOA DR			J	1.3 STREET	T ADI	Dress							
-	Y-ST-ZIP	SARAS	OTA FL				1.4 CITY - S	ST-Z	IP				— .			
TITE		PDT			☐ DELET	Ł	2.1 TITLE						∐ CI	iange		Addition
NAI			EDER, ROBERT	C			2.2 NAME									
	EET ADDRESS	SARAS(SERENOA DR			1	2.3 STREET		1							
TITE	Y-ST-ZIP	OATIASI	JIA FL		DELET	F	2 4 CITY -: 3.1 TITLE	51-1	(IP					nange	Т	Addition
NAA							3.2 NAME						~	ungo		rigation
	EET ADORESS						3.3 STREET	T AM	DECC.							
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TITL					☐ DELET	E	4.1 TITLE	<u> </u>	"				☐ Ci	nange		Addition
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CITY	r-ST-ZIP					[4.4 CITY - S	ST- Z	IP				_			
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	Y-ST-ZIP						5.4 City-S	ST-Z	IP							
TITL	E I				☐ DELET	E	6.1 TITLE		- 1					lange		Addition

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.

6.2 NAME

6.3 STREET ADDRESS

CIGNATURE.

NAME

STREET ADDRESS