


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jun 21, 2007 8:00 am**  
**Secretary of State**

06-21-2007 90022 007 \*\*\*550.00

<b>DOCUMENT # F02000005031</b> 1. Entity Name <b>KRAMSKI NORTH AMERICA, INC.</b>					
Principal Place of Business <b>7300 BRYAN DAIRY ROAD, SUITE 475 LARGO, FL 33777-1506</b>			Mailing Address <b>7300 BRYAN DAIRY ROAD, SUITE 475 LARGO, FL 33777</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>98-0381721</b>	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent  <b>CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE <b>PCEO</b> <input type="checkbox"/> Delete NAME <b>KRAMSKI, ANDREAS</b> STREET ADDRESS <b>HEILBRONNERSTR. 10, 75179 PFORZHEIM</b> CITY-ST-ZIP <b>GERMANY,</b>	TITLE <b>CEO</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME <b>Kramski, Andreas</b> STREET ADDRESS <b>Heilbronnerstr, 10, 75179 Pforzheim</b> CITY-ST-ZIP <b>Germany</b>				
TITLE <b>TD</b> <input type="checkbox"/> Delete NAME <b>KRAMSKI, WIESTAW</b> STREET ADDRESS <b>HEILBRONNERSTR. 10, 75179 PFORZHEIM</b> CITY-ST-ZIP <b>GERMANY,</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE <b>SD</b> <input type="checkbox"/> Delete NAME <b>KRAMSKI, RENATE</b> STREET ADDRESS <b>HEILBRONNERSTR. 10, 75179 PFORZHEIM</b> CITY-ST-ZIP <b>GERMANY,</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE <b>President</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition NAME <b>Bischoff, Martin</b> STREET ADDRESS <b>7300 Bryan Dairy Rd Ste 475</b> CITY-ST-ZIP <b>Largo FL 33777</b>				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP				
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
<b>SIGNATURE:</b>  <b>Bischoff, Martin</b> <b>6/13/07</b> <b>727 825-1500</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

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