COI	E NOW: FIL PROFIT RPORATION UAL REPORT 1998	ING FEE AF	FLORIDA DEP Sandra Secre	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED Jan 27 1998 8:00am Secretary of State			
KRAM	MENT #  PRINTING, INC	H62407	(2)						
-035 N.E126	ORTH MIAMI PL 331611			S-& OLASSMAN SE-STH-FLOOR S-FL-33154		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  06/18/1985			
	lace of Business	OCE .	2a. Mailing Address	ANT INVITACE	•	4. FEI Number		Ar	oplied For
21 140 N Suite, Apt	HE CONCOU	KSL	26 1140 NANE Suite, Apt. #, etc.	CONCOURSE	<u> </u>	59-2553382	-		ot Applicable
22 FIFTH	FLOOR	-	27 2 FIFTH F	LOOR	ļ	5. Certificate of Status Desired	<b>/</b> *	Fee Re	Additional equired
City & Stat BAY	ARBUR 15LA	ANDS, FL	City & State  28 BAY HARBY	ISLANDS, FL	_	Election Campaign Financing     Trust Fund Contribution		\$5.00 Added	May Be to Fees
<sup>Zip</sup> スペー		untry 15	7215/1	Country		8. This corporation owes or has pa		-	_ ~
24 720	9. Name and Ad	ddress of Current Re	29 5515+ egistered Agent	30  VS	<del></del>	Personal Property Tax due June 10. Name and Address of New Re			_l No
SII	VERS, ROBERT I		<u></u>	81 Name			-g		-
C/	<del>o hughes, silv</del> i	e <del>rs &amp; Glassm</del> an		82 Street	t Address	s (P.O. Box Number is Not Accepta	ble)		
		URSE - 5TH FLOO	DR .	114	O KE	THE CONCOURSE			
₩	<del>Y HARBOR</del> ISLAN	ND FL 33154		83 FI	FTH	FLOOR			
				84 Cip	1V 4	NORNE ICI ALITIC	FL 8	5 Zig	Code (
11. Pursuant office or r	to the provisions of egistered agent, or	Sections 607.0502 ar both, in the State of F	nd 607.1508, Florida Stati Florida, Such change was	utes, the above-named authorized by the co	d corpora rporation	ation submits this statement for the l's board of directors. I hereby acce	nurnose of cha	IDD anding it ment as	s registered registered
	m familiar with, and	accept the obligation	ns of, Section 607.0505, F	Florida Statutes.		·			•
SIGNATURE	Signature, typed or printed	name of registered agent an	d title if applicable. (NO	OTE. Registered Agent signatur	re required v	vhen reinstating)	DATE	<del></del>	
12.		OFFICERS AND D		13.		ADDITIONS/CHANGES TO OFFICE		*	
TITLE	P KRAM, STEVE		DELETE	1.1 TITLE			Ц	Change	☐ Addition
NAME STREET ADDRESS	1895 NE 125 S			1,2 NAME	1140	KANE CONCOURSE -	FIETH C	1.00	R
CITY-ST-ZIP	N MIAMI PL	•		1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		HARBOR ISLANDS		3154	•
TITLE	D		☐ DELETE	2.1 TITLE	<u> </u>	III II I I I I I I I I I I I I I I I I		Change	Addition
NAME	KRAM, BARBA			2.2 NAME	1		ا بـــ هم		
STREET ADDRESS	-895 N.E. 125	STREET		2.3 STREET ADDRESS	1140	KANE CONCOURSE HARBOR ISLAND			UK
CITY - ST - ZIP	-N. MIAMI FL		- December	2. 4 CITY - ST-ZIP	BAY	HARBOR ISLAND	5, H_ 32	<u> </u>	1 1 1 1 1 1 1 1 1
TITLE NAME			☐ DELETE	3.1 TITLE 3.2 NAME				Change	Addition
STREET ADDRESS				3.3 STREET ADDRESS					
CITY-ST-ZIP				3.4. CITY-ST-ZIP					
TITLE			☐ DELETE	4.1 TITLE	<u> </u>			Change	Addition
NAME				4. 2 NAME					
STREET ADDRESS				4.3 STREET ADDRESS					
CITY-ST-ZIP			☐ DELETE	4.4 CITY-ST-ZIP	-			Change	Addition
TITLE NAME			רד חברבוב	5.1 TITLE 5.2 NAME			<b>.</b>	Change	
STREET ADDRESS				5.2 NAME 5.3 STREET ADDRESS					
CITY-ST-ZIP				5.4 CITY-ST-ZIP					
TITLE		•	DELETE	6.1 TITLE	1	( 100 FF (100 Mars)		Change	Addition
NAME				6.2 NAME					

CITY-ST-ZIP

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 cath; 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.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

STOP HE FSTOVERROW

1/16/98 305-864-7531