

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # J96269

1. Entity Name
ALFRED KARRAM II, INC.



FILED
Mar 22, 2004 08:00 AM
Secretary of State

Principal Place of Business
720 E. PALMETTO PK RD.
BOCA RATON, FL 33432 US

Mailing Address
720 E. PALMETTO PK RD.
BOCA RATON, FL 33432 US



03162004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0015143

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KARRAM, ALFRED SR
720 E PALMETTO PARK RD
BOCA RATON, FL 33432

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IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	KARRAM, ALFRED
STREET ADDRESS	720 E. PALMETTO PARK ROAD
CITY-ST-ZIP	BOCA RATON, FL
TITLE	DVPT
NAME	KARRAM, EMILIA
STREET ADDRESS	720 E. PALMETTO PARK ROAD
CITY-ST-ZIP	BOCA RATON, FL
TITLE	SVP
NAME	KARRAM, ALFRED JR.
STREET ADDRESS	720 E. PALMETTO PARK ROAD
CITY-ST-ZIP	BOCA RATON, FL
TITLE	V
NAME	KARRAM, ALEXANDRA
STREET ADDRESS	720 E. PALMETTO PARK ROAD
CITY-ST-ZIP	BOCA RATON, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/22/04-80005-017 150.00

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IN THIS SPACE**

12. 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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Alfred Karam Sr. Alfred Karam, Sr. 3/16/04 (561) 394-9900