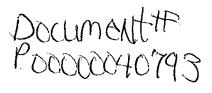
2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE AND TYPED &

FILED Apr 26, 2001 8:00 am Secretary of State ROCUMENT # P0000040793 W. KRAUS, INC. 04-26-2001 90022 040 ***150.00 الماند Principal Place of Mailing Address 3949 EVANS AVE., #205 3949 EVANS AVE., #205 FT. MYERS FL 33901 FT. MYERS FL 33901 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State Not Apolicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KRAUS, WOLFGANG Street Address (P.O. Box Number is Not Acceptable) 3949 EVANS AVE., #205 FT. MYERS FL 33901 Zip Code City 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 SIGNATURE Signature, typed or printed name of registered agent and fit air applicable Asgistered Agent signature required o DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of Sizie OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. CR2E034 (10/00) ☐ Delete ☐ Change Addition TITLE 7000 KRAUS, WOLFGANG NAME NAME 3949 EVANS AVE., #205 STREET ADDRESS STREET ADDRESS CITY-ST-Z!P CITY-ST-7IP FT. MYERS FL 33901 Addition ☐ Delete ☐ Change TITLE TITL: NAME NAME STREET ADDRESS STREET ADDRESS C!TY-ST-ZIP CITY-ST-ZIP TITLE Delcte THE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP C!TY - ST - 719 ☐ Change TITLE ☐ Delete TIT: F Addition NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Fiorida 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 fusted to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if of the corporation or the receiver or changed, or on an attachment with 941-275-7766

Daytme Phone #





FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

538260

March 7, 2001

W. KRAUS, INC. 3949 EVANS AVE., #205 FT. MYERS, FL 33901

SUBJECT: W. KRAUS, INC. Ref. Number: P00000040793

We have received your document for W. KRAUS, INC. and check(s) totaling \$150.00. However, your check(s) and document are being returned for the following:

The person that signed the annual report/uniform business report is not listed as a current officer/director of the corporation. The person signing must be listed as a current officer/director on the report or on an attachment.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6059.

Michelle Milligan Document Specialist

Letter Number: 301A00013816