

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 18, 2001 8:00 am
Secretary of State

05-18-2001 91569 044 ***150.00

DOCUMENT # P00000043719

1. Entity Name

KRP INTERNATIONAL, INC.

Principal Place of Business

**1332 AVON LANE 10-11
 N. LAUDERDALE FL 33068**

Mailing Address

**1332 AVON LANE 10-11
 N. LAUDERDALE FL 33068**

2. Principal Place of Business

2065 NW 15th Place.

3. Mailing Address

2065 NW 15th Place

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Delray Beach 33445

Delray Beach Fl 33445

**City & State
 Delray Beach Fl 33445**

**City & State
 Delray Beach Fl 33445**

**Zip
 33445**

**Country
 USA**

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PRICE, D J
 1332 AVON LANE 10-11
 N. LAUDERDALE FL 33068**

Name

2065 NW 15th Place.

City Delray Beach FL Zip Code 33445

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
 NAME **PRICE, D J**
 STREET ADDRESS **1332 AVON LANE 10-11**
 CITY-ST-ZIP **N. LAUDERDALE FL 33068**

TITLE ☒ Change ☐ Addition
 NAME **2065 NW 15th Place**
 STREET ADDRESS **Delray Beach Fl 33445**
 CITY-ST-ZIP

TITLE **D** ☐ Delete
 NAME **PRICE, KATHLEEN**
 STREET ADDRESS **1332 AVON LANE 10-11**
 CITY-ST-ZIP **N. LAUDERDALE FL 33068**

TITLE ☒ Change ☐ Addition
 NAME **2065 NW 15th Place**
 STREET ADDRESS **Delray Beach Fl 33445**
 CITY-ST-ZIP

TITLE **D** ☐ Delete
 NAME **PRICE, AMY**
 STREET ADDRESS **1332 AVON LANE 10-11**
 CITY-ST-ZIP **N. LAUDERDALE FL 33068**

TITLE ☒ Change ☐ Addition
 NAME **2065 NW 15th Place.**
 STREET ADDRESS **Delray Beach Fl 33445.**
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Delete
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 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 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), 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 11 or Block 12 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

April 30/01

Date

954-673-9300

Daytime Phone #

CR2E034 (10/00)