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FILED
Jul 11, 2002 8:00 am
Secretary of State

04-11-2002 90666 005 ***150.00

2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P01000036904**

1. Entity Name

KRAMERS COMPLETE CAR CARE, INC.

Principal Place of Business

1853 VICTORIA AVE
FT MYERS FL 33901

Mailing Address

1853 VICTORIA AVE
FT MYERS FL 33901

2. Principal Place of Business

745 NE 19 PL

Suite, Apt. #, etc.

3. Mailing Address

745 NE 19 PL

Suite, Apt. #, etc.

City & State

Cape Coral FL

City & State

Cape Coral FL

FBI Number

651095111

Applied For

Not Applicable

Zip

Country

Zip

Country

B. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PARSONS, WADE H ESQUIRE
1853 VICTORIA AVE
FT MYERS FL 33901

7. Name and Address of New Registered Agent

Name: RICHARD KRAMER
Street Address (P.O. Box Number is Not Acceptable)
335 Kismet Pkwy

City: Cape Coral

FL

Zip Code
33909

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, 2002 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution.☐ \$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIPPresident
Richard Kramer
335 Kismet Pkwy
Cape Coral FL 33909☐ DeleteTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIPPresident
Donna Kramer
335 Kismet Pkwy
Cape Coral FL 33909☐ Change ☒ AdditionTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(D), 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 registered or trustee empowered to execute this report as required by Chapter 807, 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

4-2-02

941-574-7707

Date

Telephone (Area)

Donna M. Kramer: 18 June 02

CR2034 (9/01)