FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Apr 24 1998 8:00am Secretary of State

DOCUMENT # P93000014356 (8) KRAMER'S KAB, INC.					
Principal Place of Business 800 NW 7TH AVE FT LAUDERDALE FL 33311		Mailing Address 6241 SW 9TH ST PLANTATION FL 33317		T INDIVIDUA ME SAIED HINI EDHI DEWI DEWI DUNI	THUN DIDUK KINI AKAN DIA 1001
		US		DO NOT WRITE IN TH	IIS SPACE
				3. Date Incorporated or Qualified 02/25/1993	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 26				65-0411280	Not Applicable
Suite, Apt. #, etc. 27		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	·	6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25 9. Name and Address of Curren	29 nt Registered Agent	30	Personal Property Tax due June 30. 10. Name and Address of New Registere	Yes No
KR.	AMER, DAVID H		81 Name	To. Manie and Addition of Holl Hogiston	ou rigorit
800 NW 7TH AVE			82 Street A	Address (P.O. Box Number is Not Acceptable)	
FT LAUDERDALE FL 33311			60	41 5 W 944 ST	
			83		
			84 City P	autation F	85 Zip Code
11 Purguant to the provisions of Soctions 607 0502 and 607 1608 Elocida Statutos the above named connection as hards the delay of the statutos of Societies and societies as hards the statutos of Societies as hards the statutos of Societies and Societies and Societies as hards the statutos of Societies and Soc					
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I are familiar with, and accept the appointment of Section 607.0505, Florida Statutes.					
SIGNATURE	Signature, typed or printed name of registered age		David H.	Kramer 4/211	98
12.	OFFICERS AND	·	E: Registered Agent signature 13.	ADDITIONS/CHANGES TO OFFICERS A	· i
TITLE	DP	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	KRAMER, DAVID H		1.2 NAME	1 c. oth ct	
STREET ADDRESS City-St-Zip	80 0 NW 7TH AVE Ft lauderdale Fl		1.3 STREET ADDRESS	6241 SW 9th St Montation, FL 333	17
TITLE	TI DIOCHDALL IC	DELETE	1.4 CHTY - ST - ZIP 2.1 TITLE	Plantaller, FL 300	Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		2.4 CITY-ST-ZIP		
TITLE NAME		LJ DELETE	3.1 TITLE		Change L Addition
STREET ADDRESS			3.2 NAME 3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETÉ	4.4 City - ST - ZIP 5.1 TITLE	`	Change Addition
NAME		LJ DELETE	5.2 NAME		L Change L Addition
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
14. hereby c	ertify that the information supplied wi	th this filing does not qualify fo	6.4 CITY-S1-ZIP or the exemption stated	d in Section 119.07(3)(i), Florida Statutes. I further	certify that the information

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 oath, that I am an officer or director of the corporation or the receiver or fursite 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.

CIGNATURE CA

2/2/2/2000 S

DOME HALL

954 5158902 5540