SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000031877 (2)

RUSS KRAMER CREATIVE, INC.

FILED Aug 25 1997 8:00am Secretary of State

HU35 K	HAMEH CHEATIVE, INC.			
Principal Place	e of Business	Mailing Address	···•·	T DEGREE THE PRINCE THE PRINCE OF THE PRINCE
TAMPA FL 33629 TAMPA FL 33629				DO ALOT IMDITE IN THE ODAOF
US		US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report
2 Principal P	lace of Business	2a. Mailing Address		04/30/1993 05/01/1996 4. FEI Number Applied For
	BAYSHORE BLVD	26 IIII BAYS	HORE BLU	
Suite, Apt.		Suite, Apt. #, etc.	7 - 1 - 2 - 2	\$0.75 Additional
22 15 ~	· <u> </u>	27 E-1		Fee Required
23 CLEA	FRWATER FL	City & State 28 CLEARWATS	ER FL	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip 2 1/ 10	Country	8. This corporation owes or has paid the current year intaggible
34		29 34619 30	0]	Personal Property Tax due June 30. 🔲 Yes 🔀 No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent
KRAMER, RUSSELL W 81 Name K RA				KRAMER RUSSELL W
to a det for making metals			ddress (P.O. Box Number is Not Acceptable)	
TAMPA FL 33629			I BAYSHORE BLVD	
83			83 SUL	ITE E-1
				- 85 Zip Code
				FL 34619
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered 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 am familiar with and accept the obligations of Section 607.0505, Florida Statutes.				
SIGNATURE	MIME	7		
SIGNATURE	Spriature, typed of printed name of registered agen	t and tille if applicable. (NOTE: B	logistered Agent signature rea	equired when reinstaling) DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE	Change Addit
NAME	KRAMER, RUSSELL W	ļ	1.2 NAME	KRAMER, PUSSELL W.
STREET ADDRESS	4302 W EL PRADO BLVD	•	1.3 STREET ADDRESS 1	ILLI BAYSHORE BLVD, E-1 CLEARWATER, FL 34619
CITY-ST-ZIP	TAMPA FL		1.4 City-St-ZiP C	CLEARWATER, FL 34619
TITLE		☐ DELETE	2.1 TITLE	☐ Change ☐ Addit
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP		□ PS+EXE	2 4 CiTY-ST-ZiP	Change D Addit
TITLE		L_I DELETE	3.1 1/11.6	Change Addit
NAME ATTENDED		,	3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP TITLE		DELETE	3.4. CITY- ST- ZIP 4.1 TITLE	Change Addit
· ·		End MARIL	4. 2 NAME	to charge of Madit
NAME Street address			4.3 STREET ADDRESS	•
1			4.4 CITY - ST - ZIP	
CITY-ST-ZIP TITLE		DELETE	5.1 TITLE	Change Addit
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CHY-ST-ZIP	
TITLE		☐ DELETE	6.1 TiTLE	☐ Change ☐ Addit
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	
	by certify that the information supplied	with this filing does not qualify f		ated 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 trusted 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 attaction with an address.

CICNATURE.