SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jul 15 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCU 1. Corporation	MENT # P93000	087198 (6)				
KRR RE	ALTY, INC.					is \$214 \$618 (\$614 1268) Jihin 1818 (\$414 1816
Principal Plac	e of Business	Mailing Address	<del></del>			II OBANI ODIOR IBRIE 180EN KIDIO IDION IONI ODDI
3450 W. BUSC	H BOULEVARD	3450 W. BUSCH BOULEY	/ARD			
SUITE 195 SUITE 195					DO NOT WOR	E IN THIS SOLOE
TAMPA FL 336	18	TAMPA FL 33618			3. Date Incorporated or Qualified	TE IN THIS SPACE
					12/17/1993	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21 26		26			59-3218849	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
27					V. Continuate of Status Desired	Fee Required
City & State		<del> </del> 1	City & State		6. Election Campaign Financing	<b>\$5.00</b> Мау Ве
Zip	Country	28     Zip	Country		Trust Fund Contribution	Added to Fees
24	25	29	30		This corporation owes or has particular to the personal Property Tax due June	
1271	9. Name and Address of Curren		130		10. Name and Address of New Ro	
NES	BITT, STEVEN M		81	Name		
3450 W. BUSCH BOULEVARD			82	Street Addr	ess (P.O. Box Number is Not Acceptat	alo)
SUITE 195			02	Street Addit	ess (F.O. box Number is Not Acceptat	жеј
TAM	PA FL 33618		83			
	•		84	City		85 Zip Code
				•		
office or agent. Is	to the provisions of sections 607.0502 registered agent, or both, in the State am familiar with, and accept the obliga	2 and 607.1508, Florida Statu of Florida. Such change was ations of, section 607.0505, F	tes, the above-na authorized by the lorida Statutes.	amed corpor ne corporatio	ation submits this statement for the pur on's board of directors. I hereby accept	pose of changing its registered the appointment as registered
SIGNATURE	Stoopher hand or printed rappy of registered ages	t and title if anniholds	NOTE: Registered Age	-1		DATE
12.	Signature, typed or printed manie of registered agent and title if applicable (Ni OFFICERS AND DIRECTORS		13.	ur esgnarore requ	ADDITIONS/CHANGES TO OFF	
TITLE	D DELETE		1.1 TITLE			Change Addition
NAME	VALENTI, DARRELL J		1.2 NAME			E change E radiion
STREET ADDRESS	A 4 M A 4 4 M 4 M 4 M 4 M 4 M 4 M 4 M 4		1.3 STREET ADDRESS			
CITY-ST-ZIP	TAMPA FL 33618		1.4 CITY-ST-ZI	IP .		
TITLE	D 🚡	DELETE	21 TITLE			Change Addition
NAME	NESPITT, STEVEN M		2.2 NAME			
STREET ADDRESS 3450 W BUSCH BLVD STE 195			2.3 STREET AC	DDRESS		
CITY-ST-ZIP	TAMPA FL	···-	2.4 CITY-ST-Z	IP		
TITLE	DELETE		3.1 TITLE			Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET AC			
CITY-ST-ZIP TITLE		Попи	3.4 City-St-zi	P		
NAME	. □ DELETE					Change Addition
STREET ADDRESS	ESS		4.2 NAME 4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZI			
TITLE		DELETE	5.1 TITLE	r	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME			5.2 NAME			Change
STREET ADDRESS			5.3 STREET AD	DRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZI	1		
TITLE		DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET AD	DRESS		į
CITY-ST-ZIP			6.4 CiTY-ST-Zi	<sub>-</sub>		

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 ennual report or supplemental ennual 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 true embowered to execute this report as required by Chapter 307, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or an attackness with an address.