

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  
Sandya B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Jul 28 1998 8:00am  
Secretary of State

DOCUMENT # P94000004025 (0)

1. Corporation Name

SARO MANAGEMENT, INC.

Principal Place of Business

615 ELIZABETH STREET  
KEY WEST FL 33040  
US

Mailing Address

615 ELIZABETH STREET  
KEY WEST FL 33040

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/18/1994

4. FEI Number

58-2100249

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 5802 LONGWOOD RUN BLVD.

Suite, Apt. #, etc.

22 City & State

23 SARASOTA FLORIDA

Zip

Country

24 34243

2a. Mailing Address

26 5802 LONGWOOD RUN BLVD.

Suite, Apt. #, etc.

27 City & State

28 SARASOTA, FLORIDA

Zip

Country

29 34243

30

9. Name and Address of Current Registered Agent

THE PRENTICE HALL CORPORATION SYSTEM, INC.  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE FL 32301

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PT ☐ DELETE

NAME KRAMER, ROBERT  
STREET ADDRESS 615 ELIZABETH ST.  
CITY-ST-ZIP KEY WEST FL 33040

TITLE S ☐ DELETE

NAME WALD, LAURENCE I  
STREET ADDRESS 54 RICHFIELD ST.  
CITY-ST-ZIP PLAINVILLE NY 11803

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME  
1.3 STREET ADDRESS 5802 LONGWOOD RUN BLVD.  
1.4 CITY-ST-ZIP SARASOTA, FL 34243

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP


6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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 trustee 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.

SIGNATURE:

CR2E034 (5/98)

  
CAROL LYNN MONVILLE, C.P.A., P.A.  
2300 BEE RIDGE ROAD  
SARASOTA, FLORIDA 34239  
(941) 924-1040

JULY 17, 1998

DIVISION OF CORPORATIONS  
ANNUAL REPORTS SECTION  
P.O. BOX 1500  
TALLAHASSEE, FL 32302-1500

RE: SARO MANAGEMENT, INC.  
P94000004025  
ANNUAL REPORT - 1998

GENTLEMEN:

IN REFERENCE TO THE ABOVE MENTIONED CORPORATION, I AM REQUESTING AN ABATEMENT OF PENALTIES FOR THE 1998 ANNUAL REPORT. THE CORPORATE OFFICERS DID NOT RECEIVE AN ORIGINAL ANNUAL REPORT FORM, AS IT WAS MAILED TO THE PRESIDENTS FORMER WIFE'S ADDRESS AND NOT FORWARDED, AND HE WAS NOT AWARE THAT THIS REPORT NEEDED TO BE FILED ANNUALLY. ALSO, THE PRESIDENT, ROBERT KRAMER, SUFFERS FROM MULTIPLE SCLIOROSIS AND HIS CURRENT MEDICATION CAUSES MEMORY LAPSES.

I HAVE ENCLOSED A CHECK FOR THE \$150 ANNUAL FEE WHICH WOULD BE THE AMOUNT DUE WITHOUT PENALTY.

PLEASE CONSIDER OUR REQUEST, WE ASSURE YOU THAT THIS REPORT WILL BE FILED TIMELY IN THE FUTURE AND THE CORRECT ADDRESS HAS BEEN PUT ON THE FORM.

THANK YOU FOR YOUR TIME IN THIS MATTER.

VERY TRULY YOURS,

  
CAROL LYNN MONVILLE, CPA