

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 JUN 21 PM 3:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

100001520731

-06/22/95--01062--005

*****225.00 *****225.00

DO NOT WRITE IN THIS SPACE

DOCUMENT # P94000018603 (8)

Corporation Name

FLORIDA KRANICH CORP.

Principal Place of Business

14 FOURTH ST
SARASOTA FL 34237

Mailing Address

2014 FOURTH ST
SARASOTA FL 34237

2 Date Incorporated or Qualified

03/10/1994

3 Date of Last Report

Principal Place of Business

3400 S. Tamiami Trail

2a. Mailing Address

26 3400 S. Tamiami Trail

4. FEI Number

65-0489284

Applied For

Not Applicable

Suite, Apt. #, etc.

301

Suite, Apt. #, etc.

27 301

5 Certificate of Status Desired

\$8.75 Additional
Fee Required

City & State

Sarasota, FL

City & State

28 Sarasota, FL

6.1

\$5.00 May Be
Added to Fees

Zip

34239

Country

25 Sarasota

Zip

29 34239

Country

30 Sarasota

7 This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

Name and Address of Current Registered Agent

1c Name and Address of New Registered Agent

JAENSCH, PETER J
2014 FOURTH ST
SARASOTA FL 34237

81 Name

82

(P.O. Box Number is Not Acceptable)

83 Sutie 301

84 City

Sarasota

FL

85 Zip Code
34239

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

Peter J. Jaensch

5/24/95

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

(NOTE: Registered Agent Signature Required when registering)

(DATE)

OFFICERS AND DIRECTORS

13.

1	D	PETERSOHN, HANS	11 TITLE	P	☐ Change ☒ Addition
2		108 ANGUILLA LN	12 NAME		
3		BONITA SPRINGS FL 33923	13 STREET ADDRESS		
4			14 CITY - ST - ZIP		
5	D	PETERSOHN, LISELOTTE	21 TITLE	VP	☐ Change ☒ Addition
6		108 ANGUILLA LN	22 NAME		
7		BONITA SPRINGS FL 33923	23 STREET ADDRESS		
8			24 CITY - ST - ZIP		
9			31 TITLE		☐ Change ☐ Addition
10			32 NAME		
11			33 STREET ADDRESS		
12			34 CITY - ST - ZIP		
13			41 TITLE		☐ Change ☐ Addition
14			42 NAME		
15			43 STREET ADDRESS		
16			44 CITY - ST - ZIP		
17			51 TITLE		☐ Change ☐ Addition
18			52 NAME		
19			53 STREET ADDRESS		
20			54 CITY - ST - ZIP		
21			61 TITLE		☐ Change ☐ Addition
22			62 NAME		
23			63 STREET ADDRESS		
24			64 CITY - ST - ZIP		

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Hans Petersohn

5/24/95 813-9366-9841

(Date)

(Filing Number)