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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Mar 03 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000049496 (0)

KREMER SALES, INC.

Principal Place of Business Mailing Address					F UNDELDER OLD HOLLE BIRGE MONIC MOTE MACEL MORTE	Afora fatur di den endir dell'Afort
32106 PONDE DELAND FL 3 US	ROSA AVENUE 12720	P.O. BOX 226 Deland FL 32721-022 US	DELAND FL 32721-0226		DO NOT WRITE IN TH	IIS SPACE
					3. Date Incorporated or Qualified	
					07/05/1994	· · · · · · · · · · · · · · · · · · ·
<u> </u>	Place of Business	— <u> </u>	2a. Mailing Address		4. FEI Number	Applied For
21 Suite Ant	# oto	Suite, Apt. #, etc.			59-3253046	Not Applicable
Suite, Apt. #, etc.		27	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	e	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country Zip		Соц	ntry	8. This corporation owes or has paid the	current year Intangible
24	25 29 30		30		Personal Property Tax due June 30.	Yes No
g. Name and Address of Current Registered Agent					10. Name and Address of New Register	ed Agent
KRE	EMER, MARY S.			81 Name		
32108 PONDEROSA AVENUE				82 Street Add	ress (P.O. Box Number is Not Acceptable)	
DEL	LAND FL 32720			0.000	(.o. zok tambo to trock tooptable)	
				63		
				B4 City		let 7:- Code
				City	F	85 Zip Code
office or r	to the provisions of Sections 607 registered agent, or both, in the S im familiar with, and accept the o	itate of Florida. Such change wa	is authorized	by the corpora	poration submits this statement for the purposition's board of directors. I hereby accept the a	e of changing its registered appointment as registered
SIGNATURE		•				
	Signature, typod or printed name of registere			Agent signature requi		
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D MOTHER MADY O	☐ DELETE	1.1 11			Change
NAME	KREMER, MARY S		1,2 NA	ME		
STREET ADDRESS	7673 JUNIPER ST		1.3 ST	REET ADDRESS		
CITY-ST-ZIP	MIRAMAR FL 33023	- December		Y-ST-ZiP		
TITLE		☐ DELETE	2.1 TI	i		Change Addition
NAME			2.2 NA			
STREET ADDRESS			2.3 ST	reet address		
CITY-ST-ZIP	···	Toriere.		TY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	
TITLE		DELET e	3.1 117			Change Addition
NAME			3.2 NA			
STREET ADDRESS				REET ADORESS		
CITY-ST-ZIP				TY-ST-ZIP		
TITLE		☐ DELETE	4,1 10			☐ Change ☐ Addition
NAME			4.2 N	ı		
STREET ADDRESS			4.3 ST	REET ADDRESS		
CITY-ST-ZIP				Y-ST-ZIP		
TITLE		☐ DELETE	5.1 TIT	l.E		Change Addition
NAME			5.2 NA	ME [
STREET ADDRESS			5.3 ST	REET ADDRESS		
CITY-ST-ZIP			5 4 C1	Y-ST-ZIP		
TITLE		☐ DELETE	61 TIT	LE		Change Addition
NAME			6.2 NA	ME		
STREET ADDRESS			6.3 ST	REET ADDRESS		
CITY-ST-ZIP			6.4 Ci1	Y - ST - 7IP		1

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.

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