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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

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May 12 1997 8:00am

Secretary of State

0079629

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P95000022276 (6)

KRF, INC	C.								
Principal Plac	e of Business	Mailing	g Address				U BOYE IIDII	HORA HARIT HARA	
902 SOUTH HIGHWAY 17-92 DEBARY FL 32713			2349 GREENWOOD STREET DELTONA FL 32738-5028 IIS						
		-				3. Date Incorporated or Qualified	3a. D	ate of Last R	eport
			·			03/20/1995	04/	24/1996	
2. Principal P	Place of Business	2a. Ma	iling Address			4. FEI Number		Ar	plied For
21		26				59-3304008			1 Applicable
Suite. Apt	#. etc	F1	ite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75	
City & Stat		27 Cit	y & State					Fee Re	··· · ····
	it;	28	y & Siate			Election Campaign Financing Trust Fund Contribution	П	\$5.00 Added	
23	Country	Zip		Cour	ntrv	8. This corporation has liability for			
24	25	29		30	,	Florida Statutes		No	. 133.032,
	9. Name and Address of Cu		d Agent	1221		10. Name and Address of New Ro	egistered	Agent	
FRIT	SCH, K R				81 Name				
	GREENWOOD ST.) ₁	B2 Street Add	Iress (P.O. Box Number is Not Accepta	ble)		
DEL	TONA FL 32738								
					83				
				ļ:	84 City			85 Zip	Code
	,			i	1 1		FL	_ ' '	
			FOO Floride Chat.	1 1bb		maratian a thatita this statement for the			
	registered agent, or both, in the Samiliar with, and accept the o	.0502 and 607.1 State of Florida. Sobligations of, Se	508, Florida Statu Such change was ection 607,0505, F	tes, the ab authorized lorida Statu	ove-named cor by the corpora ites.	poration submits this statement for the attion's board of directors. I hereby acce	purpose o	oointment as	registered registered
office or i agent. La SIGNATURE	registered agent, or both, in the Sam familiar with, and accept the o					poretion submits this statement for the ation's board of directors. I hereby accessived when reinstating)	purpose o	oointment as	registered
	5 guardic typed to professionaria of legistera		plicable (NO				DATE	D DIRECTOR	IS IN 12
SIGNATURE	Signature, typical or protest name of legistrite OFFICERS	ed agent and litle if app	plicable (NO	YE Registered	Agent signature requ	sired when reinstating)	DATE		IS IN 12
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