

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 12, 2001 8:00 am
Secretary of State

06-22-2001 90219 012 ***150.00

DOCUMENT # <u>9965000 11279</u>				 DO NOT WRITE IN THIS SPACE	
1. Entity Name <u>KRAMMAR, INC.</u> (PA)					
Principal Place of Business <u>Salon 7</u>		Mailing Address <u>23269 State Rd. 7 #110</u> <u>BOCA RATON, FL 33428</u>			
2. Principal Place of Business <u>same</u>		3. Mailing Address <u>same</u>			
Suite, Apt. #, etc. <u>same</u>		Suite, Apt. #, etc. <u>same</u>			
City & State <u>same</u>		City & State <u>same</u>			
Zip <u>same</u>	Country <u>Palm Beach</u>	Zip <u>same</u>	Country <u>same</u>	4. FEI Number <u>65-0644086</u>	Applied For <input type="checkbox"/> Not Applicable
				5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
<u>Jeffrey Winiakoff</u> <u>4875 N. Federal Hwy 7th Floor</u> <u>Fort Lauderdale, FL 33308</u>				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL	Zip Code
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.					
SIGNATURE <u>[Signature]</u> <small>Signature, typed or printed name of registered agent and date if applicable (NOTE: Registered Agent signature required when reinstating)</small>				DATE <u>7/2/01</u>	
9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. <input checked="" type="checkbox"/> <small>(See criteria on back)</small>		FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State		10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>President</u> <u>FRANK BISIGNANO</u> <u>20501 SAUSA RD.</u> <u>BOCA RATON, FL 33498</u>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>Vice President Secretary</u> <u>CHARLES GIANATASIO</u> <u>48323 103 TRAIL South</u> <u>BOCA RATON, FL 33498</u>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Frank Bisignano</u> FRANK BISIGNANO <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				6-19-01 <u>561 4770610</u> <small>Date Daytime Phone #</small>	

CR2E034 (11/00)