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

## CORPORATION ANNUAL REPORT **19**98



ELORIDA DEPARTMENT OF STATE

## **Bandra B. Mortham**

Secretary of State DIVISION OF CORPORATIONS

P96000072766 (4) DOCUMENT #

KR MOBILE, INC

## **FILED** May 15 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 7000 WEST PALMETTO PARK ROAD STE 408 7000 WEST PALMETTO PARK ROAD STE 408 **BOCA RATON FL 33433 BOCA RATON FL 33433** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/30/1996 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 21 26 65-0693987 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ashenfelter, maria s 7000 WEST PALMETTO PARK ROAD STE 408 82 Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33433** 83 84 City Zip Code 11. Pursuant to the provisions of Soctions 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: Rog stered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE ☐ Addition Change TITLE 1.1 TITLE KONOVER, SIMON NAME 1.2 NAME 7000 WEST PALMETTO PARK ROAD STE 408 STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL 33433** CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 21 TITLE Change Addition ROSEN, JONATHAN P NAME 2.2 NAME 40 EAST 69TH STREET STREET ADDRESS 2.3 STREET ADDRESS **NEW YORK NY 10021** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE Change Addition 3.1 TITLE STEINMARK, FRED P NAME 3.2 NAME 7000 WEST PALMETTO PARK ROAD STE 408 STREET ADDRESS 3.3 STREET ADDRESS **BOCA RATON FL 33433** CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change ☐ Addition TITLE 4.1 TITLE ASHENFELTER, MARIA S NAME 4. 2 NAME STREET ADDRESS 7000 WEST PALMETTO PARK ROAD STE 408 4.3 STREET ADDRESS **80**CA RATON FL 33433 CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADORESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. Thereby 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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511. 394. 4224