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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT # P96000084518 (5)

KRUM ACCOUNTING INC.

Principal Place of Business Mailing Address						-{	TOLUK DEDOK DAKO	11801 1811 1801
% IRWIN S. KRUM		% IRWIN S. KRUM						
7737 N.W. 79TH AVENUE			7737 N.W. 79TH AVENUE					
TAMARAC FL 33321		TAMARAC FL 33321	TAMARAC FL 33321			DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified 10/14/1996		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Applied For
21		26	26			65-0691563		Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.7	5 Additional
22		27	27		5. Certificate of Status Desired	Fee	Required	
City & State		City & State	City & State			6. Election Campaign Financing	\$5.0	00 May Be
23		28	·			Trust Fund Contribution	Adde	ed to Fees
Zip	Country	Zφ	Cour	ntry		8. This corporation owes or has paid the		
24	25	29	30]			Personal Property Tax due June 30.	Yes	□ No
	9. Name and Address of Curr	rent Hegistered Agent		81	Name	10. Name and Address of New Register	ed Agent	
	UM, IRWIN S			•	Name			
7737 N.W. 79TH AVENUE			8		Street Addre	ess (P.O. Box Number is Not Acceptable)		
1A7	MARAC FL 33321		<u>-</u>	83				
}			}'	53				
			[7	84	City		85 Z	ip Code
44 Puteuani	to the provisions of Sections 607.0	502 and 607 1509 Florida C	tatutos, tho ab	0.00	named corps			a ite registered
11. 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.								as registered
	m tamiliar with, and accept the ob	ligations of, Section 607.0505	. Florida Statu	Aes.				
SIGNATURE	Signature, typed or printed while of registered	autrus and title if antificultio	(NOTE: Registered	Agen	of signature require	d when (pinstating) DAT	F	
12.		ND DIRECTORS	13.	719	a aignature requires	ADDITIONS/CHANGES TO OFFICERS		ORS IN 12
TITLE	D	DELETE	1.1 TITE	LE			Chang	
NAME	KRUM, IRWIN S		1.2 NAM	ME	[
STREET ADDRESS 7737 N.W. 79TH AVENUE			1.3 STR		ADDRESS			
CITY-ST-ZIP	TAMARAC FL 33321		1.4 CH	Y - ST -	- ZIP			
TITLE		☐ DELETE 2.1		LE			Chang	e Addition
NAME			2.2 NAM	2.2 NAME				
STREET ADDRESS			23 STR	EET A	Address			
CITY-ST-ZIP			2. 4 CH	Y-SI	I - ZIP			**
TITLE	☐ DELETE		. 3.1 TITE	3.1 TITLE			☐ Chang	ge Addition
NAME			3.2 NAM	ΜE				
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP		C or ter	3.4. CIT		I-ZIP			
TITLE		DEL e te	4.1 1111				L Chang	ge L Addition
NAME			4. 2 NA					
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP		DELETE	4.4 CITY 5.1 TITL		- ZIP		Chang	ge Addition
TITLE NAME		L better	5 1 111L				L. Cuang	ν □ Λυσικόπ
STREET ADDRESS			1		Innacee			
					ADDRESS	<u>.</u>		
CITY-ST-ZIP TITLE		☐ DELETE	5.4 CITY 6.1 TITL		- 211		Chang	je Addition
NAME			6.2 NAM					
STREET ADDRESS					ADDRESS			
STREET PRODUCTS			0.3 5 m	LLIA	1001400			

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 trusted 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:

4/24/98 954-720-652

FILED

Apr 30 1998 8:00am

Secretary of State

R2E034 (10/97