

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

FILED

Apr 08 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000100475 (8)

1. Corporation Name

KRISTI'S ON THE OCEAN, INC.



Principal Place of Business

Mailing Address

2400 S OCEAN DR
FT PIERCE FL 34950

2400 S OCEAN DR
FT PIERCE FL 34949-6018

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

KAMPICHLER, GERHARD F
2400 S OCEAN DR
FT PIERCE FL 34950

3. Date Incorporated or Qualified

12/12/1996

3a. Date of Last Report

4. FEI Number

65-0726199

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes



Yes ☐ No

10. Name and Address of New Registered Agent

81 Name GARDNER, ARDEN D.

82 Street Address (P.O. Box Number is Not Acceptable)

2400 SOUTH OCEAN DR

83

84 City Ft. Pierce.

FL

85 Zip Code

34949

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.

SIGNATURE

[Signature]

ARDEN D. GARDNER, President 3/28/97

12. OFFICERS AND DIRECTORS

TITLE	D	DELETE
NAME	KAMPICHLER, GERHARD F	
STREET ADDRESS	P O BOX 8483 N/A	
CITY-ST-ZIP	PT ST LUCIE FL 34985	
TITLE	D	DELETE
NAME	WEHR-KAMPICHLER, ERIKA	
STREET ADDRESS	P O BOX 8483 N/A	
CITY-ST-ZIP	PT ST LUCIE FL 34985	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P/S	Change	Addition
1.2 NAME	ARDEN D. GARDNER		
1.3 STREET ADDRESS	2400 S. OCEAN DR		
1.4 CITY-ST-ZIP	FT. PIERCE, FL 34950 49		
2.1 TITLE		Change	Addition
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE		Change	Addition
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE		Change	Addition
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		Change	Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		Change	Addition
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

14. I do 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, 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.

SIGNATURE:

[Signature]

ARDEN D. GARDNER, President

3/28/97 (56) 4654200

Daytime Phone # 001070

CR2E034 (9/96)