

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Sep 22, 2002 8:00 am
Secretary of State

09-22-2002 90058 036 ***550.00

DOCUMENT # P97000037849

1. Entity Name

KW POMPARO, INC.

DO NOT WRITE IN THIS SPACE

873164

2. Principal Place of Business

Pompano Square Mall

3. Mailing Address

Attn: Lawrence A. Krause

Suite, Apt. #, etc.

One Pompano Square

Suite, Apt. #, etc.

1001 Bayhill Drive, #170

City & State

Pompano Beach, FL

City & State

San Bruno, CA

4. FEI Number

52-2025283

Applied For

Not Applicable

Zip
33062

Country
US

Zip
94066

Country
US

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Matthew Zifrony, Esq.

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

Tripp Scott, P.A.

110 SE 6th Street, 15th Floor

City

Ft. Lauderdale

FL

Zip Code
33301

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

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

9/19/02

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DPST
Krause, Lawrence A.
1001 Bayhill Drive, #170
San Bruno, CA 94066

TITLE
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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: 

Lawrence A. Krause, Pres.

9/19/02

650-266-8055

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)