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FILE NOW: FILI	NG FEE AFTE	R MAY 1 IS \$225.	QQ
PROFIT	2 W 10	FLORIDA DEPARTMENT OF ST	ΑT
CORPORATION	Lize	Sandra B. Mortnam	



CORP ANNU	PORATION AL REPORT 996	RATION Sandra B Mortham REPORT Sccretary of State		•	
	MENT # S23022	`			
	& CLAY KREMER, INC.	, -			
BE	TTY KREMER, INC.				
Principal Place		Mailing Address			
	THERN CROSS LANE, #2				
BOYNT	ON BEACH, FLORIDA	33436		3. Date incorporated or Quality	fied 3a. Date of Last Report
				1/3/91	1995
2. Principal Pla	ce of Business	2a. Ma ling Address		4. f El Number	Applied for
Z I	thern Cross Lane	7 Southern C	ross Lane	65-0235181	Not Applicable \$8.75 Additional
Suite, Apt # 208	elc	Suite, Apt. #, etc. #208		5. Certificate of Status Desired	d Fee Required
City & State		C ty & State		6. Flection Campaign Financi	
23 Boynt	on Beach, Florida	28 Boynton Beac			Added to Fees
7 ^p 3343	6 Country Beach	^{7/p} 33436	Country Palm Bea		y for intang:ble tax under s=199 032. Yes □ No
24 3373	9. Name and Address of Current		'	10. Name and Address of Ne	w Registered Agent
	g. Harris and Harris and		81 Name		
DONALD L. BASS 82 Street Add			ddress (P.O. Box Number is Not Acc	eptable)	
	S.E. Woodwind St.		63		
Hobe	Sound, FL 33455				85 Z _{IP} Code
			84 City		FL
11. Pursuant to	the provisions of Sections 607,0502	and 607 1508, Florida Statutes	the above-named o	corporation submits this statement for oration's board of directors. Thereby	the purpose of changing its registered accept the appointment as registered
office or re agent I an	gistered agent, or both in the State (n familiar with, and accept the obliga	nons of, Section 607 0505, Florid	la Statutes	ordinario bodina or encocoro	
SIGNATURE _		d of 5	a quitera di Aspetiti Supri di del	owned when restricted	DATE
12.	signar re hyperior purior rame in registered age. OFFICERS ANE		13.	ADDITIONS/CHANGES TO	OFFICERS AND DIRECTORS IN 12
TITLE	President/Dir.	XXDELETE	1 1 TITLE	President	XX Change Addition
NAME	Clayton Kremer		1.2 NAME	Elizabeth Kremer 815 W. Boynton Bea	ob Dista #11_101
STREET ADDRESS	815 W. Boynton Bea Boynton Beach, FL	ch_Blyd. #11-101	1.3 STREET ADDRESS	Boynton Beach, FL	
CITY - ST - ZIP	Boynton Beach, FL	33426 DELETE	14 CITY - ST ZIP 2 1 TillE	Boyncon Beach, Ph	Change Addit on
T-TLE NAME	Secretary/Dir Elizabeth Kremer	<u>[_]</u>	2.2 NAME		
STREET ADDRESS	815 W. Boynton Bea	ch Blvd, #11-101	23 STREET ADDRESS		
CITY ST-ZIP	Boynton Beach, FL	33426	2.4 CHY - \$1 - Z:P		Change Addition
TITLE		☐ DELETE	3 1 111/16		[_] Change] Addition
NAME			3.2 NAME 3.3 STREET ADDRESS		
STREET ADDRESS			3.4 CITY ST-ZIP		
CITY - ST - ZIF TITLE		DELETE	4 1 THLE		Change Addition
NAME			4 2 NAME	100001 -04/22/96	788131
STREET ADDRESS			4 3 STREET ADDRESS	-U4/22/961	J1022004
CITY-ST-ZP		DELETE	4.4.011Y - ST - ZIP	***200.00	Change Add tion
TITLE		נ) טנננונ	5 1 TITLE 5 2 NAME		
NAME CTUCK! ADVIGGGG			5.3 STREET ADDRESS		
STREET ADDRESS CITY - ST - ZIP			5.4 CITY - ST - Z-P		
TITLE		☐ DELE1E	6 THE		Change Addition
NAME			6.2 NAME		27,19
STREET ADDRESS			6.3 STREET ADORESS		44
CITY - ST - ZIP			64C-TY-ST-ZIF	to mile for the exemption stated in S	Section 119 07(3)(k) Florida Statutes I

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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, i lorida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

Elizabeth Kremer

Elizabeth Kremer

Bignature And Typed OR PRINTED NAME OF SIGNAG OFFICER OR DIRECTOR

Bignature And Typed OR PRINTED NAME OF SIGNAG OFFICER OR DIRECTOR

To the Chapter of the Chapter of the Corporation of the Corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, i lorida Statutes I the Chapter of the Corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, i lorida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

Elizabeth Kremer

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