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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # \$27379

(4)

KRAEER HOLDINGS, INC.

FILED
Apr 29 1997 8:00am
Secretary of State

Change

Change

Addition

Addition

Principal Place 200 N FEDERAL POMPANO BEA		Mailing Address 4126 NORLAND AVENUE BURNABY B.C. V5G3S								
						3. Date Incorporated or Qualified			eport	
9 Principal P	Place of Business	0- 14-8 4-8				01/25/1991 4. FEI Number	05/07/	, , ,		
21	Tace of business	— ` ·	2a. Mailing Address			52-1723832	Applied For Not Applicable			
Suite, Apt. #, etc.			Suite, Apt. #, etc.			32-1120002			Additional	
22		· · · ·	27			5. Certificate of Status Desired		Fee Re		
City & Stat	te		City & State			6. Election Campaign Financing				
23		28	28			6. Election Campaign Financing \$5,00 May Be Trust Fund Contribution Added to Fees				
Zip	Country	Zip		Country		8. This corporation has liability for	r intangible tax			
24	25	29		30			Yes \			
	9. Name and Address of Curre	ent Registered Agent				10. Name and Address of New R	egistered Age	nt		
CT CORPORATION SYSTEM 1200 S PINE ISLAND RD PLANTATION FL 33323				81 82 83	82 Street Address (P.O. Box Number is Not Acceptable)					
				84	,		FL!		Code	
11. Pursuant office or i agent. La	to the provisions of Sections 607.05 registered agent, or both, in the Stat am familiar with, and accept the obli	002 and 607,1508, Flo te of Florida. Such cha gations of, Section 60	rida Statule inge was a 7.0505, Flo	es, the abov authorized b orida Statute	e-named o y the corp s.	corporation submits this statement for the oration's board of directors. Thereby accoration	purpose of cha apt the appoint	anging it ment as	s registered registered	
SIGNATURE	Signature, typed or printed name of registered a	and a state of the state of the		ch and an		required when reinstating)				
12.		ND DIRECTORS	HOR	13.	ent signature i	ADDITIONS/CHANGES TO OFF	DATE	PECTOL	C IN 10	
TITLE	PASD		DELETE	1.1 1111.6	·	RODITIONS/CITAINGES TO OFF		Change	Addition	
NAME	RUSSELL, ROBERT D			1.2 NAME			_			
STREET ADDRESS	200 N. FEDERAL HIGHWAY			1.3 STREET	ADDRESS					
CITY-ST-ZIP	POMPANO BEACH FL 33062			1.4 CITY - S						
TITLE	AS		DELETE	2 1 DILE	(Change	Addition	
NAME	HYNDMAN, PETER S			2.2 NAME						
STREET ADDRESS	4126 NORLAND AVENUE			23 STREET	ADDRESS					
CITY-ST-ZIP	Burnaby, B.C. Canada V5G	i3 S8		2 4 CITY-	S1-7IP					
TITLE	VST	<u>₹×</u> (DELETE	3 1 1/1LF		STV		Change	x Addition	
NAME	WRIGHT, GARY L			3.2 NAME		Rollings, Gregory K.				
STREET ADDRESS	800-50 EAST RIVERCENTER E	BLVD.		3 3 \$18[[]	ADDRESS	681 North Avenue				
CITY-ST-ZIP	COVINGTON KY 41011			3 4. CHY-	ST - ZIP	Jonesboro, GA 30236				
TITLE	DX		DELETE	4.1 TITLE			⊠	Change	Addition	
NAME	FITZSIMMONS, DAVID			4. 2 NAME						
STREET ADDRESS	800-50 EAST RIVERCENTER E	SLVD.		4.2 0101.01	Mindlee					

4.4 CITY-ST-ZiP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

5.4 CHTY - ST - ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELFTE

COVINGTON KY 41011

LOEWEN, RAYMOND L

4126 NORLANDL AVENUE

BURNABY, B.C. CANADA V5G3S8

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

14. I do hereby certify that the information supplied with this fill oddes 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 finual 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 all priment with an address.