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

**PROFIT** 



ELORIDA DEPARTMENT OF STATE

1. Corporation Name

GREGG W. AUSNEHMER, CPA, P.A.

CORPORATION ANNUAL REPORT		Katherine Harris Secretary of State	Secretary of State
1999		DIVISION OF CORPORATIONS	03-05-1999 90057 015 ***150.00
OCUMENT # 1.7	76200		

Mar 05 1999 8:00 am



Principal Place	e of Business	Mailing Address		
2683 NW 41 ST		2683 NW 41 ST		
BOCA RATON FL 33434		BOCA RATON FL 33434		DO NOT WRITE IN THIS SPACE
US		US		
				3. Date Incorporated or Qualifed 05/29/1990
		15		
2. Principal Place of Business		2a. Mailing Address		
21 SSS NW Y AVENUE		26 SSS NW 4 AVENUE		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired Fee Required Fee Required
22 //4		27 114		
City & State RATON FL		City & State  28 BOCA RATON FL		6. Election Campaign Financing \$5.00 May Be
		. <u>                                    </u>	Country	Trust Fund Contribution Added to Fees
Zip 24 334	Country	<sup>Zip</sup> 33432 30	,	8. This corporation owes the current year intangible  Personal Property Tax  Yes No
<sub>24</sub> 337	,,	_ 23	L	Personal Property Tax. X Yes LINO  10. Name and Address of New Registered Agent
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Registered Agent
ALICA	NEHMER, GREGG W.		UT Name	
	NW 41 ST		82 Street A	ddress (P.O. Box Number is Not Acceptable)
	A RATON FL 33434		55.	S NW 4 AVENUE #114
BUC	A NATUN FL 33434		83	
			84 City	85 Zip Code
			100	CA KATON FL 33432
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the above-named o	orporation submits this statement for the purpose of changing its registered
office or n	egistered agent, or both, in the State on familiar with, and accept the obligat	of Florida. Such change was authorions of Section 607 0505. Florida	orized by the corpor Statutes.	ation's board of directors. I hereby accept the appointment as registered
=		) //		1-29-99
SIGNATURE	Signature, typed or punture risms of registered agent	and title if applicable. (NOTE: Reg	istered Agent signature req	uired when reinstating) DATE
12.	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PST	DELETE	1.1 TITLE	Change Addition
NAME	AUSNEHMER, GREGG W.		1.2 NAME	
STREET ADDRESS	2683 NW 41 ST		1.3 STREET ADDRESS	SST NW Y AVERUE #114
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY-ST-ZIP	BOCA RATON, FL 33432
TITLE	D	☐ DELETE	2.1 TITLE	Change Addition
NAME	AUSNEHMER, GREGG W.		22 NAME	
	2683 NW_41 ST			CICINO Y AVENUE #114
- STREET ADDRESS	BOCA RATON FL		2. 4 CITY-ST-ZIP	BOCA RATON FL 33432
CITY-ST-ZIP	BOOKTRIONTE	☐ DELETE	3.1 TITLE	Change Addition
TITLE		- Official	32 NAME	
NAME		, ,		·
STREET ADDRESS		·	3.3 STREET ADDRESS	ļ
CITY-ST-ZIP		Floritte	3.4. CITY-ST-ZIP	☐ Change ☐ Addition
TITLE		☐ DELETE	4.1 TITLE	
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	`
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	
UITT-31-4IP	i e			

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 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, with all other like empowered.

SIGNATURE: