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Feb 05, 1999 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

02-05-1999 90024 050 ****158.75

DOCUMENT # P93000002388

1. Corporation Name
HAUSLEIN & COMPANY, INC.



Principal Place of Business Mailing Address
65 SOUTH BEACH ROAD 165 SOUTH BEACH ROAD
HOBE SOUND FL 33455 HOBE SOUND FL 33455

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/11/1993
4. FEI Number: 65-0386141
5. Certificate of Status Desired: [checked] \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: [unchecked] \$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax: [checked] Yes [unchecked] No

9. Name and Address of Current Registered Agent
HAUSLEIN, JAMES
165 SOUTH BEACH ROAD
HOBE SOUND FL 33455

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Table with 2 main columns: 12. OFFICERS AND DIRECTORS and 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Includes fields for Title, Name, Street Address, City-ST-ZIP, and checkboxes for Change/Addition/Delete.

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: James N. Hauslein SIGNATURE REQUIRED
1-13-99 Date 203-622-6300 Daytime Phone #

CR2E034 (11/98)