

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000099353

Entity Name: KLAUBER & SHIELDS, P.A.

FILED  
Mar 10, 2011  
Secretary of State

**Current Principal Place of Business:**

8751 WEST BROWARD BOULEVARD  
#410  
PLANTATION, FL 33324 US

**New Principal Place of Business:**

**Current Mailing Address:**

8751 WEST BROWARD BOULEVARD  
#410  
PLANTATION, FL 33324 US

**New Mailing Address:**

FEI Number: 65-0795395      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

KLAUBER, ADAM  
8751 WEST BROWARD BOULEVARD  
#410  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: KLAUBER, ADAM C  
Address: 8751 WEST BROWARD BOULEVARD #410  
City-St-Zip: PLANTATION, FL 33324

Title: VP  
Name: SHIELDS, JOHANNA S  
Address: 8751 WEST BROWARD BOULEVARD #410  
City-St-Zip: PLANTATION, FL 33324

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: ADAM KLAUBER

PD

03/10/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date