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Secretary of State

02-10-2005 90042 007 ***150.00

2005 FOR PROFIT CORPORATION ANNUAL REPORT

2

DOCUMENT # P04000049651

1. Entity Name
HAUSSMAN ENTERPRISES INC

66006487

Principal Place of Business	Mailing Address
C/O FREDERICK HAUSSMAN, JR. 101 SW CRESCENT AVENUE PORT ST. LUCIE, FL 34984	C/O FREDERICK HAUSSMAN, JR. 101 SW CRESCENT AVENUE PORT ST. LUCIE, FL 34984
2. Principal Place of Business: 1253 Old Okeechobee Rd	3. Mailing Address: 1253 old Okeechobee Rd.
Suite, Apt. #, etc.: B7	Suite, Apt. #, etc.: B7
City & State: West Palm Beach	City & State: West Palm Beach
Zip: 33401 Country:	Zip: 33401 Country:

02072005 Chg-P CR2E034 (10/03)

4. FEI Number: 20-0983380 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HAUSSMAN, FREDERICK JR. 101 SW CRESCENT AVENUE PORT ST. LUCIE, FL 34984 New →	Name: FREDERICK HAUSSMAN Jr. Street Address (P.O. Box Number is Not Acceptable): 1253 OLD OKEECHOBEE RD #B7 City: WEST PALM BEACH FL Zip Code: 33401

8. 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. I am familiar with, and accept the obligations of registered agent.

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

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Pres Frederick HAUSSMAN suite B7 1253 old Okeechobee Rd W. P. B. Fl. 33401 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X Frederick Haussman Jr. — X 2/7/05 — X (561) 262-2651

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #