FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **564714** **(4)**

1. Corporation Name

BIELER, INC.

Principal Place of Business	Mailing Address
2700 N. 29 AVE. SUITE 204 HOLLYWOOD FL 33020 US	2700 N. 29 AVE. SUITE 204 HOLLYWOOD FL 33020 US

2. Principal Place of Business	2a. Mailing Address
21 3807 N 29 Avenue	26 3807 N 29 Avenue
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Hollywood FL	City & State 28 Hollywood FL
Zip 24 33020 Country 25 USA	Zip 29 33020 Country 30 USA

3. Date Incorporated or Qualified: 12/22/1977
3a. Date of Last Report: 05/01/1995
4. FEI Number: 59-1783454 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

BIELER, BERNARD
2700 N. 29 AVE
STE 204
HOLLYWOOD FL 33020

10. Name and Address of New Registered Agent

81 Name: BERNARD BIELER
82 Street Address (P.O. Box Number is Not Acceptable): 3807 N. 29 Avenue
83
84 City: Hollywood FL 85 Zip Code: 33020

11. Pursuant to the provisions of Section 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: B. Bieler 1-28-96
Signature of new registered agent (if changing) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☐ DELETE	1.1 TITLE		☒ Change ☐ Addition
NAME	BIELER, BERNARD		1.2 NAME		
STREET ADDRESS	2700 N. 29 AVE #204		1.3 STREET ADDRESS	3807 N. 29 Avenue	
CITY-ST-ZIP	HOLLYWOOD FL		1.4 CITY-ST-ZIP	Hollywood FL 33020	
TITLE	VD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	BIELER, WILLIAM		2.2 NAME		
STREET ADDRESS	3700 N W 62ND ST		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
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		

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: x B. Bieler 1-28-96 305 925 0644
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #