


2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 JAN -7 AM 10: 59

DOCUMENT # J21822 1. Entry Name HENRY BLEIER, C.P.A., P.A.	
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Principal Place of Business 1776 N PINE IS RD 118 FORT LAUDERDALE, FL 33322	Mailing Address 1776 N PINE IS RD 118 FORT LAUDERDALE, FL 33322
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DO NOT WRITE IN THIS SPACE



01052009 No Chg-P CR2E034 (11/08)

4. FEI Number 59-2678231	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BLEIER, HENRY
1776 N PINE IS RD
118
FORT LAUDERDALE, FL 33322

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2009 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BLEIER, HENRY 1776 N PINE IS RD C 307 FORT LAUDERDALE, FL 33322
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01/07/09--01051--014 **150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Henry Bleier CPA Date: 1/5/09 Daytime Phone #: 954-963-1444

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KS