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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

1996

(4)

1. Corporation Name CLINICAL AUDIOLOGY AND HEARING AIDS INC.

| Principal Place of Business Mailing Address | | | | | 1 1481/118 \$111 \$1515 11981 \$1111 \$1 | libi libite Alibit dizati azast n | (A16 B1841 B1B1/ 1881 | |
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| % SUSAN BLAUEL 2194 HWY. A1A. STE 208 INDIAN HARBOUR BCH FL 32937 | | | % SUSAN BLAUEL 2194 HWY. A1A. STE 208 INDIAN HARBOUR BCH FL 32937 | | | | | |
| | | | | | | 3, Date Incorporated or Qualified 11/18/1986 | 3a. Date of Last 04/24/ | 1995 |
| . Principal Plac | ce of Business | ⊢ ¬ | , Mailing Address | | | 4. FEI Number 59-2737527 | | Applied For Not Applicable |
| | | 26 | Suite, Apt. #, etc. | | | | \$8.7 | 5 Additional |
| Suite, Apt. #, | , etc. | 27 | Saile, Apr. #, etc. | | | 5. Certificate of Status Desired | 1 1 | Required |
| City & State | | | City & State | | | 6. Election Campaign Financing | 1 1 | 00 May Be |
| <u> </u> | | 28 | | | | Trust Fund Contribution 8. This corporation has liability for | Auc | led to Fees |
| Zıp I | Country 25 | 29 | Zip | Coun | try | | No | 3 199.002, |
| | g; Name and Address | | stered Agent | 1001 | | 10. Name and Address of New F | Registered Agent | |
| | 9. 110 | | | | Name | | | |
| BLAUEL, SUSAN 2194 HWY. A1A | | | | ļ, | 32 Street Add | lress (P.O. Box Number is Not Acceptat | ble) | |
| | | | | | | | | |
| STE 20 | | | | ' | 83 | | | |
| INDIAN | HARBOUR BEACH FI | L | | 7 | B4 City | | FL 85 | Zip Code |
| | | | | | _1 | oration submits this statement for the pu | roose of changing it | s registered office |
| NGNATURE | n, and accept the obligation | | | | igent signature recul- | | DATE | |
| familiar with | Signature, typeo or printed name of | registered agent and title it | f applicable. (N | iOTE: Registered A | agent signature recur | | | TORS IN 12 |
| familiar with | Signature, typeo or printed name of | | f applicable. (N | | | ed when relistating) ADDITIONS/CHANGES TO OFF | | |
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SIGNATURE: Susan Blavel Prosided 4/18/16 7373
SIGNATURE: Dele Dele Dele Printed Name OF SIGNING OFFICER OR DIRECTOR