

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 04, 2008 08:00 A
Secretary of State

DOCUMENT # M02386

1. Entity Name

RICHARD W. ASCHENBRENNER, P.A.



Principal Place of Business

9500 S DADELAND BLVD
STE 360
MIAMI, FL 33156 US

Mailing Address

9500 S DADELAND BLVD
STE 360
MIAMI, FL 33156 US



01082008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2441290

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ASCHENBRENNER, RICHARD W.
9500 S DADELAND BLVD STE 360
STE 360
MIAMI, FL 33156

**DO NOT WRITE
IN THIS SPACE**

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 re-stating)

DATE

FILE NOW!!! - FEE IS \$150.00

After May 1, 2008, 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
D
ASCHENBRENNER, RICHARD W
9500 S DADELAND BLVD STE 360
MIAMI, FL 33156

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
P
ASCHENBRENNER, RICHARD W
9500 S DADELAND BLVD STE 360
MIAMI, FL 33156

TITLE
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CITY - ST - ZIP

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U00000815958
02/14/08-80030-005 150.00

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-28-08

305-670-6061