FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M44897 Corporation Name G. D. KLIEGER, INC. (0)

FILED Apr 21 1997 8:00am Secretary of State

Principal Place of Business 1809 HARRISON ST. SUITE 804			Mailing Address 1909 HARRISON ST. SUITE 204			f (BBibbil ist dibit bibbi baien ibita (Bibt dan albit alast asam bibit bibit dibit dibit						
HOLLYWOOD F	L 33020		LLYWOOD FL 33020-50	071						F 6. 5.		0
US			US						Date of Last Report 05/01/1996			
2. Principal P	lace of Business	2a.	Mailing Address			_		4. FEI Number			7	Applied For
21		26						65-0000736			١	lot Applicable
Sulte, Apt. #, etc.			Suite, Apt. #, etc.					E O Jistania di Ciata a Danimal			\$8.75	Additional
22	•	27						5. Certificate of Status Desired			Fee F	Required
City & State	9		City & State					6. Election Campaign Financin	g		\$5.00	May Be
23		28						Trust Fund Contribution			Added	to Fees
Zip	Country		Z ip	C	Country	/		8. This corporation has liability	for in	tangible	tax undor	s. 199.032,
24	25	29		30				Florida Statutes		Yes [
	9. Name and Address of Curren	t Regis	tered Agent					10. Name and Address of New	Regi	istered A	vgent	
KUE	GER, GERSHON				81		Name					
8300	SW 92ND TERRACE		4		82	١.,	Street Addre	ss (P.O. Box Number is Not Acce	ntabie	o)		
	MI FL 33156				52	Ι΄	Spoci ridero	is (F.O. DOX Hambor to the Free	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	~		
					83							
					84	1	City				85 Zip	Code
							·			FL		
office or r agent. I a	to the provisions of Sections 607.050; egistered agent, or both, in the State in familiar with, and accept the obliga	of Florid ations of	07.1508, Florida Statu da. Such change was I, Section 607.0505, F	utes, the s authori Florida S	e above ized by Statutes	e-r y tl s.	named corpo ne corporatio	oration submits this statement for ton's board of directors. I hereby a	ccept	the app	ointment a	s registered
SIGNATURE	Signature, typed or printed name of registered age	nt and title	il applicable (NC	Off Rogst	tered Age	ent	signature require	d when reinstating)		DATE		
12.	OFFICERS AND			1	3.			ADDITIONS/CHANGES TO O	FFICE	RS AND		
TITLE	DPS		☐ DELETE	1.	1 TITLE						☐ Change	Addition
NAME	Klieger, Gershon			1.	2 NAME							
STREET ADDRESS	1909 HARRISON ST STE 204			1.	3 STREFT	i AD	DORESS					
CITY - ST - ZIP	HOLLYWOOD FL			1.	4 CHY - S	S1-:	ZIP					
TITLE			DELETE		1 TITLE						☐ Change	Addition
NAME	KLIEGER, GERSHON			2.	2 NAME							
STREET ADDRESS	1909 HARRISON ST STE 204			2.	3 STREET	I AE	DORESS					
CITY-ST-ZIP	HOLLYWOOD FL			2.	4 CITY-!	ST-	ZIP					
TITLE			DELETE		1 TITLE						Change	Addition
'NAME				3.	2 NAME		1					
STREET ADDRESS				3.	3 STREE1	1 AE	ODRESS					
CHTY-ST-ZIP					4. CITY - 1		·					
TITLÉ			DELETE		1 TITLE						Change	Addition
NAME				- 1	2 NAME							
STREET ADDRESS					3 STREET		IDRESS					
1					.4 CHTY - S							
CETY-\$T-ZIP			☐ DELETE		.4 UTTLE	31-	£11				Change	☐ Addition
					2 NAME							
NAME	•					,	appree					
STREET ADDRESS					3 STREET							
CITY-ST-ZIP			DELETE		4 001Y-S	ST -	ZIP				Change	Addition
TITLE			☐ DULLIE		1 101LE		·				FT Availing	☐ VOOIDOU
NAME				1	2 NAME							
STREET ADDRESS				6	3 STREET	T A[JDRESS					
l == == =	ŀ				10.711.0	C.T	7.D					

GRANDI KLIFFER FOUND

dictor (90)023-214