

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

FILED
May 04 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # M76996 (1)
1. Corporation Name
PAULI GROUP, INC.



Principal Place of Business 27 BAYMEADOW COURT ORMOND BEACH FL 32174-4804	Mailing Address P.O. BOX 10002 DAYTONA BEACH FL 32120-0002
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2100 S. Ridgewood Ave # 42 Suite, Apt. #, etc. 22 36 Suite # 42 City & State 23 So. Daytona, FL Zip 24 32119 Country 25 Volusia		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30		3. Date Incorporated or Qualified 04/19/1988	4. FEI Number 59-2889846	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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No		

9. Name and Address of Current Registered Agent BURGARD, ROBERT M SR 27 BAYMEADOWS CT ORMOND BEACH FL 32174		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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11. Pursuant to the provisions of Sections 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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VP	11 TITLE	P
NAME	BURGARD, JR., ROBERT M	12 NAME	ROBERT M BURGARD, JR
STREET ADDRESS	27 BAYMEADOW CT	13 STREET ADDRESS	27 BAYMEADOW CT
CITY-ST-ZIP	ORMOND BEACH FL 32174-4804	14 CITY-ST-ZIP	ORMOND BEACH, FL 32174-4804
TITLE	P	21 TITLE	VP
NAME	BURGARD, SR., ROBERT M	22 NAME	ROBERT M BURGARD, SR
STREET ADDRESS	27 BAYMEADOW CT	23 STREET ADDRESS	27 BAYMEADOW CT
CITY-ST-ZIP	ORMOND BEACH FL 32174-4804	24 CITY-ST-ZIP	ORMOND BEACH, FL 32174-4804
TITLE		31 TITLE	
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 *Robert M BURGARD, JR* 4-22-98

CR2E034 (10/97)