

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M97652

FILED  
Jan 05, 2012  
Secretary of State

Entity Name: 9544 CORPORATION

**Current Principal Place of Business:**

9585 HARDING AVE  
SURFSIDE, FL 33154

**New Principal Place of Business:**

**Current Mailing Address:**

9585 HARDING AVE  
SURFSIDE, FL 33154

**New Mailing Address:**

FEI Number: 65-0083003

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PACKAR, SHARLANE K  
9585 HARDING AVE  
SURFSIDE, FL 33154 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: PACKAR, SHARLANE K  
Address: 9585 HARDING AVE  
City-St-Zip: SURFSIDE, FL 33154

Title: D  
Name: BROAD, JUDITH K  
Address: 9585 HARDING AVE  
City-St-Zip: SURFSIDE, FL 33154

Title: D  
Name: KAPPEL, JAMES  
Address: 9585 HARDING AVE  
City-St-Zip: SURFSIDE, FL 33154

Title: D  
Name: MONTGOMERY, SARAH  
Address: 720 NE 69TH STREET APT. 17N  
City-St-Zip: MIAMI, FL 33138

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: SHARLANE K. PACKAR

PRES

01/05/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date