

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2008 8:00 am
Secretary of State

04-03-2008 90024 049 ****70.00

DOCUMENT # N00000002046 1. Entity Name AMERICAN UNITED SENIORS, INC					
Principal Place of Business 8250 W. FLAGLER ST. STE. 116 MIAMI, FL 33144			Mailing Address 8250 W. FLAGLER ST. STE. 116 MIAMI, FL 33144		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent BISMARCK, ROBERT M 8250 W. FLAGLER ST. STE. 116 MIAMI, FL 33144				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> <div style="text-align: right;">DATE _____</div>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
<div style="text-align: right;"> Make check payable to Florida Department of State </div>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEL VALLE, NYDIA 8742 S.W. 27TH ST. MIAMI, FL 33165 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP. D WILFREDO CARDENAS 8842 S.W. 4 Lane MIAMI-FL 33174 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BISMARCK, ROBERTO M 3420 S.W. 108 AVE MIAMI, FL 33165 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Romelia Cardenas 8842 SW. 4 Lane MIAMI, FL 33174 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HERNANDEZ, PLACIDO 14000 S.W. 90 AVE MIAMI, FL 33176 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MORAN-HERNANDEZ, GLORIA 14621 S.W. 83 CT MIAMI, FL 33158 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARTINEZ, OLGA C 3420 S.W. 108 AVE MIAMI, FL 33165 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KINGSBERG, EDWARD 14621 S.W. 83 CT MIAMI, FL 33158 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 617, 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: <i>Robert M. Bismarck</i>			<i>3/21/08</i> <i>305-226-4555</i>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		

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2008 Annual Report

Listed below is the most recent information reported for the entity. Please review and click the 'Continue' button at the bottom to generate the annual report form.

**** The document number, business name and file date cannot be changed on the report. ****

Document Number N00000002046

Business Entity Name AMERICAN UNITED SENIORS, INC

Original File Date 03/28/2000

FEI Number 65-0995694

Principal Address 8250 W. FLAGLER ST.
STE. 116
MIAMI, FL 33144

Mailing Address 8250 W. FLAGLER ST.
STE. 116
MIAMI, FL 33144

Registered Agent ROBERT M BISMARCK
8250 W. FLAGLER ST.
STE. 116
MIAMI, FL 33144 US

Officer/Director Name And Address

D
NYDIA DEL VALLE
8742 S.W. 27TH ST.
MIAMI, FL 33165

D
ROBERTO M BISMARCK
3420 S.W. 108 AVE
MIAMI, FL 33165

D
PLACIDO HERNANDEZ
14000 S.W. 90 AVE
MIAMI, FL 33176

D
GLORIA MORAN-HERNANDEZ
14621 S.W. 83 CT
MIAMI, FL 33158

D
OLGA C MARTINEZ
3420 S.W. 108 AVE
MIAMI, FL 33165

D
EDWARD KINGSBERG
14621 S.W. 83 CT
MIAMI, FL 33158

If all of the above
information is correct and
you do not wish to make
any changes, please
select:

If you need to make
changes to the above
information, please
select: