

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 91042 017 ***150.00

DOCUMENT # P00000027908

1. Entity Name

TRACY NIEDERMEYER, INC.



Principal Place of Business

411 NORTHEAST 22 STREET
APT #7
MIAMI FL 33137

Mailing Address

411 NORTHEAST 22 STREET, #7
MIAMI FL 33137

2. Principal Place of Business

8337 NE 3 Court
Suite, Apt. #, etc.

3. Mailing Address

8337 NE 3 Court
Suite, Apt. #, etc.



MOORE

CR2E034 (11/03)

City & State

Miami Florida

Zip
33138

Country

US

City & State

Miami Florida

Zip
33138

Country

US

4. FEI Number

65-1031686

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NIEDERMEYER, TRACY
411 NORTHEAST 22 STREET, #7
MIAMI FL 33137

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Tracy Niedermeyer

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-30-4

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME NIEDERMEYER, TRACY
STREET ADDRESS 411 NE 22ND STREET #7
CITY-ST-ZIP MIAMI FL 33137

TITLE T ☐ Delete
NAME NIEDERMEYER, TRACY
STREET ADDRESS 411 NE 22ND STREET #7
CITY-ST-ZIP MIAMI FL 33137

TITLE S ☐ Delete
NAME NIEDERMEYER, TRACY
STREET ADDRESS 411 NE 22ND STREET #7
CITY-ST-ZIP MIAMI FL 33137

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 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 another like empowered.

SIGNATURE:

Tracy Niedermeyer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-30-4 305 751-5976