


2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 21, 2008 08:00 AM
Secretary of State

| | |
|------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| DOCUMENT # P00000027908 1. Entity Name TRACY NIEDERMEYER, INC. |  |
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| Principal Place of Business 3714 MATHESON AVENUE MIAMI FL 33133 | Mailing Address 3714 MATHESON AVENUE MIAMI FL 33133 |
|-------------------------------------------------------------------------------|-------------------------------------------------------------------|



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|-----------------------------------------------------------------------|-------------------------------------------|
| 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. | 3. Mailing Address Suite, Apt. #, etc. |
|-----------------------------------------------------------------------|-------------------------------------------|

1st MOORE CR2E034 (10/07)

| | | | |
|--------------|--------------|------------------------------------|--------------------------------------------------------|
| City & State | City & State | 4. FEI Number 65-1031686 | Applied For <input type="checkbox"/> Not Applicable |
| Zip | Country | Zip | Country |

| | |
|-----------------------------------------------------------|---------------------------------------|
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
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| 6. Name and Address of Current Registered Agent NIEDERMEYER, TRACY 3714 MATHESON AVENUE MIAMI FL 33133 |
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| 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code |
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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 _____ DATE _____

Signature, typed or printed name of registered agent (if the filer is the filer) (NOTE: Registered Agent signature required when registering)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee Will Be \$550.00
Make Check Payable to Florida Department of State.

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| 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | | | |
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| P | <input type="checkbox"/> Delete | | |
| NAME | NIEDERMEYER, TRACY | | |
| STREET ADDRESS | 3714 MATHESON AVE | | |
| CITY-ST-ZIP | MIAMI FL 33133 | | |
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| 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | | | | |
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| NAME | | | | |
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| CITY-ST-ZIP | | | | |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 607, 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 employees.

SIGNATURE: *Tracy Niedermeier*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR