

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 03, 2006 8:00 am**  
**Secretary of State**

03-03-2006 90120 004 \*\*\*150.00

**DOCUMENT # P02000120857**

1. Entity Name

FRA US PROPERTIES, INC.



Principal Place of Business

114 S.W. 49TH TERRACE  
CAPE CORAL FL 33914

Mailing Address

114 S.W. 49TH TERRACE  
CAPE CORAL FL 33914



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/05)

4. FEI Number

01-0753860

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8-75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WRIGHT, CHRISTINE F  
4427 S.E. 16TH PLACE, #2  
CAPE CORAL FL 33904

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2006 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete  
NAME AMBIEL, FRIEDRICH  
STREET ADDRESS 114 S.W. 49TH TERRACE  
CITY-ST-ZIP CAPE CORAL FL 33914

TITLE **President / D.** ☒ Change ☐ Addition  
NAME **AMBIEL, FRIEDRICH**  
STREET ADDRESS **114 SW 49TH TERRACE**  
CITY-ST-ZIP **CAPE CORAL FL 33914**

TITLE D ☐ Delete  
NAME AMBIEL, RADMILA  
STREET ADDRESS 114 S.W. 49TH TERRACE  
CITY-ST-ZIP CAPE CORAL FL 33914

TITLE **Vicepresident / D.** ☒ Change ☐ Addition  
NAME **AMBIEL, RADMILA**  
STREET ADDRESS **114 SW 49TH TERRACE**  
CITY-ST-ZIP **CAPE CORAL FL 33914**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

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CITY-ST-ZIP

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 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 empowered.

SIGNATURE: Friedrich Ambiel **FRIEDRICH AMBIEL** 2/20/06 (239) 542-3079

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #