2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE: WWW

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

| Secretary of State Principal Place of Business 1515 NORTH FEDERAL HIGHWAY 1516 NORTH FEDERAL HIGHWAY 1517 NORTH Registered Agent 7. Name and Address of Durrent Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent 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 SIGNATURE FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State SIGNATURE GENSHEIMER, MARK A GENSHEIMER, MARK | | | EPUNI (AN | 1 | | i ' | ÆD | |
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| Principal Flore of Business | 7. Entity Name | | | | | May 02, 20 Secretar | 05 08:00 | AM |
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| A3-2013087 Stockholment A3 | Suite, Apt | #, etc | Suite, Apt #, etc. | | | 1st MOORE | CR2E034 (10/04) | |
| GENSHEIMER, MARK A 1515 N. FEDERAL HIGHWAY SUITE 306 BOCA RATON FL 33432 6. The above named entry submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE FILE NOW!! FEE IS 150.00 After May 1, 2005 Fee Will Be S550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 IN ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | City & Sta | te | City & State | | | 4. FEI Number 43-2013087 | | |
| GENSHEIMER MARK A 1515 N, FEDERAL HIGHWAY SUITE 306 BOCA RATON FL 33432 The above named entry submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE City FL Zip Code | Zip Country | | Zip | Country | | 5. Certificate of Status Desired | | |
| GENSHEIMER MARK A 1515 N. FEDERAL HIGHWAY SUITE 308 BOCA RATON FL 33432 City FL Zip Code City C | | 6. Name and Address of Current | Registered Agent | Nieran | | 7. Name and Address of New Ro | gistered Agent | = |
| Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) City FL Zo Code 6. 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 collegations of registered agent. SIGNATURE Signature FILE NOW!!! FEE IS \$150.00 Make Check Payable to Florida aboptament of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 NAME GENSHEIMER, MARK A OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 NAME GENSHEIMER, MARK A OSFITE ADDRESS OFFICERS AND DIRECTORS IN 11 NAME GENSHEIMER, MARK A NAME GENSHEIMER, MARK A SIRET ADDRESS OTH ST. AP OR AND OFFICERS AND DIRECTORS IN 11 NAME GENSHEIMER, MARK A SIRET ADDRESS OTH ST. AP OTHER ADDRES | GEI | VSHEIMER MARK A | | Name | | | | |
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| 12. I hereby certify that the information supplied with this filing does not quality of 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 haz 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 | | | | | | | | |
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(561) 750-1030 Daytme Phone 4