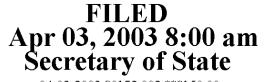
2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) P93000079582 **DOCUMENT #** 1. Entity Name R.H. BIERWEILER & ASSOCIATES, INC.



04-03-2003 90172 002 ***150.00

Principal Place of Business 8647-6 LITTLE RD NEW PORT RICHEY FL 34654 US		Mailing Address 12605 PALM TREE CT HUDSON FL 34669				
2. Principal Place of Business		3. Mailing Address		1 1850/1880 110 18189 1131/1 881/1 881/1 881/1 881/1 188/1 181/1 81/1 181/1 181/1 181/1 181/1 181/1 181/1 181/1	III	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES		
City & State		City & State		4. FEI Number 59-3212225 Applied Fo		
Zip	Country	Zip	Country	5. Certificate of Status Desired S8.75 Additional Fee Required		
	6. Name and Address of Current	Registered Agent	•	7. Name and Address of New Registered Agent		
			Name			
BIERWEILER, RAYMOND H			Street Address (P.O. Box Number is Not Acceptable)			
12605 PA	LM TREE COURT		3.13577.1337.3			
HUDSON	FL 34669				-	
		ì	City	FL Zip Code		
	named entity submits this statement for ions of registered agent.	Par	registered office or reg	egistered agent, or both, in the State of Florida. I am familiar with, and accompany and the state of Florida. I am familiar with, and accompany and the state of Florida. I am familiar with, and accompany and the state of Florida. I am familiar with, and accompany and the state of Florida. I am familiar with, and accompany and the state of Florida. I am familiar with, and accompany and the state of Florida. I am familiar with, and accompany and the state of Florida. I am familiar with, and accompany and the state of Florida. I am familiar with, and accompany and the state of Florida. I am familiar with, and accompany and the state of Florida. I am familiar with, and accompany and the state of Florida. I am familiar with, and accompany and the state of Florida. I am familiar with, and accompany and the state of Florida. I am familiar with, and accompany and the state of Florida. I am familiar with a sta	ept	
After Make Check	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 c Payable to Florida Department o		T-11-11	9. Election Campaign Financing \$5.00 May 1 Trust Fund Contribution. Added to Fees		
10.	, OFFICERS AND		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	dition	
TITLE *	D Bierweiler, raymond H	☐ Delete	TITLE NAME	Change Add	ונוסח	
STREET ADDRESS City-St-Zip	12605 PALM TREE CT HUDSON FL 34669		STREET ADDRESS CITY-ST-ZIP	•		
TITLE NAME STREET ADDRESS.	D BIERWEILER, MERYLE A 12605 PALM TREE CT	☐ Delete	TITLE NAME STREET ADDRESS CITY ST-ZIP	☐ Change ☐ Add	dition	
CITY-ST-ZIP	HUDSON FL 34669		CITT-51-21P			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Add	lition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Add	lition	
ITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Add	lition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	pertify that the information a united with	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Add		

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 tructee 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