

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P94000029426 (1)

1. Corporation Name

GRUBER'S HAUSVERWALTUNG, INC.



Principal Place of Business

422 HAMILTON AVE  
LEHIGH ACRES FL 33936

Mailing Address

P.O. BOX 2019  
ALVA FL 33920  
US

3. Date Incorporated or Qualified

04/18/1994

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

21. 2219-B Joel Blvd  
Suite, Apt. #, etc.

2a. Mailing Address

26. P.O. Box 811  
Suite, Apt. #, etc.

4. FEI Number

65-0483958

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐

Yes ☐ No

23. City & State

ALVA, FL

27. City & State

Lehigh Acres, FL

24. Zip

33920

25. Country

Lee

29. Zip

33970

30. Country

Lee

9. Name and Address of Current Registered Agent

GRUBER, HERMAN  
422 HAMILTON AVE  
LEHIGH ACRES FL 33936

10. Name and Address of New Registered Agent

81. Name

Christine Gruber

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

2241 E. 5th St. Apt 202

83.

84. City

Lehigh Acres

FL

85. Zip Code

33936

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and the applicable

(NOTE: Registered Agent signature required when reinstating)

Christine Gruber

2-6-96

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
P	GRUBER, CHRISTINE	422 HAMILTON AE	LEHIGH ACRES FL	
ST	GRUBER, CHRISTINE	422 HAMILTON AVENUE	LEHIGH ACRES FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
P	Christine Gruber	2241 E. 5th St., Apt 202	Lehigh Acres, FL 33936	
S.T	Christine Gruber	2241 E. 5th St. Apt. 202	Lehigh Acres, FL 33936	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Christine Gruber

Date

2-6-96

Daytime Phone #

941-368-6924

CR2E034 (12/95)