

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

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

05-03-2006 90239 019 \*\*\*150.00

40043332



01252006 Chg-P CR2E034 (11/05)

4. FEI Number  
65-0642909

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

## 6. Name and Address of Current Registered Agent

W&P SERVICES, INC.  
1936 LEE ROAD  
SUITE 101  
WINTER PARK, FL 32789

## 7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
450 N. Wymore Road  
City Winter Park FL 32789

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**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

## 10. OFFICERS AND DIRECTORS

TITLE DP  
NAME KAHLI, BEAT  
STREET ADDRESS 13001 FOUNDERS SQUARE DRIVE  
CITY-ST-ZIP ORLANDO, FL 32828 ☐ Delete

TITLE V  
NAME EWING, KEITH A.  
STREET ADDRESS 13001 FOUNDERS SQUARE DRIVE  
CITY-ST-ZIP ORLANDO, FL 32828 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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: \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 4/27/06 Daytime Phone #



WEBSTER, CHAIRES  
& PARTNERS, P.L.

ATTORNEYS AND BUSINESS CONSULTANTS  
FLORIDA CIVIL LAW NOTARIES

ATTACHMENT

20043932  
# 9500097325

TRADITIONAL LEGAL SERVICES  
COMMON SENSE APPROACH

**Dawn Bachan-Muckunlall**  
Paralegal

E-mail: [dmuckunlall@wplawyers.com](mailto:dmuckunlall@wplawyers.com)

April 27, 2006

**Via Certified Mail - RRR**  
Uniform Business Report Filings  
Division of Corporations  
PO Box 1500  
Tallahassee, FL 32302-1500

**Re: Beat Kahli & Associates, (USA) Inc. / 2006 Uniform Business Report**

Ladies and Gentlemen:

Enclosed with this letter is the 2006 Uniform Business Report for the above referenced corporation. Also enclosed is check #011032 in the amount of \$150.00 for the filing of same.

Please contact our office if you have any questions.

Sincerely,

Dawn Bachan-Muckunlall  
Paralegal

Enclosures