FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000013045

1. Corporation Name

IENNIFER I ALIGSPIEGER PA

FILED Feb 22, 1999 8:00 am Secretary of State 02-22-1999 90124 037 ***150.00

	n L. Augorungen, r.a.					
Principal Place	e of Business	Mailing Address				
-7251- W. PALME	TTO-PARK RD: -	7251 W. PALMETTO PARK-RD.				
200-		200				
B oca raton Fl 39433				DO NOT WRITE IN THIS	SPACE	
U\$ 				3. Date Incorporated or Qualifed 02/12/1996	·	<u>. </u>
2. Principal P	NW Corporate Blvd.	2a. Mailing Address 26 1900 NW Co	rporate Blu	4. FEI Number 65-0641557		ied For Applicable
Suite Apt.	te 400 East	Suite, Apt. #, etc. 27 SUITE 400	East	5. Certificate of Status Desired	\$8.75 Ad Fee Requ	
City & Stat	a Raton Fi	City & State 28 Boca Rate	n FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 M Added to	· 1
Zip	SI -8512 ₂₅ Country 874	Zip 33431-851230	Country USA	This corporation owes the current year In Personal Property Tax.]No
24 3343	9. Name and Address of Current F			10. Name and Address of New Registered		
	3. Name and Address of Culterit	registered Agent	81 Name /			
AUG	Spurger, Jennifer L		[] C	same)		
-7251 W. PALMETTO PARK RD.			82 Street Addre	ess (A.O. Box Number is NotrAcceptable)		
. STE.	-20 0		83	VIO TIME INVA.	.	
B 00	A RATON FL 3343 3		2011	re 400 tast		
			84 City	ca Raton FL	85 Zip Co	29-RC7
office or r	enistered agent or both in the State of	Florida Such change was author	orized by the comoratio	oration submits this statement for the purpose on's board of directors. I hereby accept the appo	f changing its re	egistered stered
agent. I a	m familiar with, and accept the obligation	poof, Section 607.0505, Florida	Statutes.	1/7/00	1	{
SIGNATURE		d sind application (NOTE: Page	istered Agent signature required	(when reinstating)	·	
12.	Signature, typed or printed name or registered agent a OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	S IN 12
TITLE	D	☐ DELETE	1.1 TMLE		Change	Addition
NAME	AUGSPURGER, JENNIFER L		1.2 NAME			
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, or on any attachment with all other like empowered.

SIGNATURE: _