


AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS																									
DOCUMENT # P98000039136 1. Corporation Name AUBREY GROUP, INC.																											
Principal Place of Business 7876 GARDNER DRIVE NAPLES FL 34109		Mailing Address 7876 GARDNER DRIVE NAPLES FL 34109																									
2. Principal Place of Business 21 5890 Enterprise Parkway Suite, Apt. #: etc.		2a. Mailing Address 26 5890 Enterprise Parkway Suite, Apt. #: etc.																									
22 City & State 23 Fort Myers, Florida Zip 33905 Country USA		27 City & State 28 Fort Myers, Florida Zip 33905 Country USA																									
9. Name and Address of Current Registered Agent KUPERMAN, ANDREW D 777 MARINE DRIVE BOCA RATON FL 33431		10. Name and Address of New Registered Agent 81 Name Andrew Kuperman 82 Street Address (P.O. Box Number is Not Acceptable) 5890 7876 Gardner Drive 83 84 City Naples FL 85 Zip Code 34109																									
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 <i>Andrew Kuperman</i> DATE 8/15/99 <small>(NOTE: Registered Agent signature required when reinstating)</small>																											
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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 an attachment with an address.																											
SIGNATURE: <i>Andrew Kuperman</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		DATE 8/15/99 <small>Date Daytime Phone #</small>																									

FILED
Aug 31, 1999 8:00 am
Secretary of State

08-31-1999 90002 021 ***550.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/29/1998

4. FEI Number

59-35-11591

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 owes the current year Intangible Personal Property.

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

Andrew Kuperman

(NOTE: Registered Agent signature required when reinstating)

8/15/99

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

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SIGNATURE:

SIGNATURE REQUIRED
Andrew Kuperman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/99)