2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P99000017635

1. Entity Name
AUERBACH FINANCIAL SERVICES INC.



FILED Apr 26, 2007 08:00 AM Secretary of State

Principal Place of Business

2500 HOLLYWOOD BLVD. SUITE 215 HOLLYWOOD, FL 33020 Mailing Address

2500 HOLLYWOOD BLVD. SUITE 215 HOLLYWOOD, FL 33020

04192007

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0898794 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

AUEBACH, CHARLES N 2500 HOLLYWOOD BLVD. SUITE 215 HOLLYWOOD, FL 33021

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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)	DAIE
Fil. After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Financ Trust Fund Contribution.	oing 🗆	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AUERBACH, CHARLES N 2500 HOLLYWOOD BLVD. SUITE 215 HOLLYWOOD, FL 33020				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-7IP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			U00000732833		
TITLE NAME STREET ADDRESS CITY-S1-ZIP					05/03/07-80061-020 150.00

12. Thereby certify that the information supplied with this filling 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 ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HARLES N. DUEBACT

Daylime Phone #

954-921-8858