

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G08732

**Entity Name:** 2549 CORPORATION**Current Principal Place of Business:**C/O LAURA PRICER  
2549 W. BROWARD BLVD  
FT LAUDERDALE, FL 33312**Current Mailing Address:**C/O LAURA PRICER  
2549 W. BROWARD BLVD  
FORT LAUDERDALE, FL 33312**FEI Number:** 59-2237559**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PRICER, LAURA  
2549 W. BROWARD BLVD  
FORT LAUDERDALE, FL 33312 US*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.***SIGNATURE:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	PD
Name	KIEFHABER, WILLIAM
Address	3782 WEST LAKE ESTATES DRIVE
City-State-Zip:	DAVIE FL 33328

Title	VP
Name	KIEFHABER, ROBERT
Address	12330 NW 7TH STREET
City-State-Zip:	PLANTATION FL 33325

Title	VP
Name	TRENTO, ALEX
Address	2406 FOOT LOOSE TRAIL
City-State-Zip:	SEBRING FL 33872

Title	ST
Name	PRICER, LAURA
Address	2549 W. BROWARD BLVD
City-State-Zip:	FORT LAUDERDALE FL 33312

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** LAURA PRICER**SEC/TREAS****02/23/2015**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date