

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **611896** (2)

1. Corporation Name  
**NEUFELDT INVESTMENT CORP.**



Principal Place of Business: **111 ISLE OF VENICE FT LAUDERDALE FL 33301**  
Mailing Address: **111 ISLE OF VENICE FT LAUDERDALE FL 33301**

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	3a. Date of Last Report
21. State, Apt. #, etc.	26. State, Apt. #, etc.	<b>03/06/1979</b>	<b>04/17/1995</b>
22. City & State	27. City & State	4. FEI Number	Applied For
23. Zip	28. Zip	<b>59-1898840</b>	Not Applicable
24. Country	29. Country	5. Certificate of Status Desired	<b>\$8.75 Additional Fee Required</b>
25. Country	30. Country	<input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	

**NEUFELDT, KLAUS P  
111 ISLE OF VENICE  
FT LAUDERDALE FL**

81. Name	85. Zip Code
82. Street Address (P.O. Box Numbers Not Acceptable)	<b>FL</b>
83.	
84. City	

11. Pursuant to the provisions of Sections 607.0607 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: \_\_\_\_\_ DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11.1 TITLE	<b>P</b>	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11.2 NAME	<b>NEUFELDT, KLAUS P.</b>	1.2 NAME	
11.3 STREET ADDRESS	<b>111 ISLE OF VENICE</b>	1.3 STREET ADDRESS	
11.4 CITY, ST, ZIP	<b>FT. LAUDERDALE FL</b>	1.4 CITY, ST, ZIP	
11.5 TITLE	<b>ST</b>	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11.6 NAME	<b>NEUFELDT, DAGMAR</b>	2.2 NAME	
11.7 STREET ADDRESS	<b>111 ISLE OF VENICE</b>	2.3 STREET ADDRESS	
11.8 CITY, ST, ZIP	<b>FT. LAUDERDALE FL</b>	2.4 CITY, ST, ZIP	
11.9 TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11.10 NAME		3.2 NAME	
11.11 STREET ADDRESS		3.3 STREET ADDRESS	
11.12 CITY, ST, ZIP		3.4 CITY, ST, ZIP	
11.13 TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11.14 NAME		4.2 NAME	
11.15 STREET ADDRESS		4.3 STREET ADDRESS	
11.16 CITY, ST, ZIP		4.4 CITY, ST, ZIP	
11.17 TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11.18 NAME		5.2 NAME	
11.19 STREET ADDRESS		5.3 STREET ADDRESS	
11.20 CITY, ST, ZIP		5.4 CITY, ST, ZIP	
11.21 TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11.22 NAME		6.2 NAME	
11.23 STREET ADDRESS		6.3 STREET ADDRESS	
11.24 CITY, ST, ZIP		6.4 CITY, ST, ZIP	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplementary 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 trustee 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 addition with an address.

SIGNATURE: *Dagmar Neufeldt* **DAGMAR NEUFELDT** 2-5-96 9:54-524-4430

CR2E034 (12/95)