


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 24, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P0000034738**  
 1. Entity Name  
**CAPT. NEPTUNUS CORPORATION**



Principal Place of Business      Mailing Address  
**4442 SEAGRAPE DR**      **4442 SEAGRAPE DR**  
**LAUDERDALE BY THE SEA, FL 33308**      **LAUDERDALE BY THE SEA, FL 33308**

**DO NOT WRITE IN THIS SPACE**



04152008      No Chg-P      CRZE034 (11/05)

4. FEI Number  
**65-0999162**      Applied For  
 Not Applicable

5. Certificate of Status Desired            **\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent  
**VAN MEERBEECK, L.E. DOLF**  
**4442 SEAGRAPE DR**  
**LAUDERDALE BY THE SEA, FL 33308**

**DO NOT WRITE IN THIS SPACE**

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)      DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
 Trust Fund Contribution.            **\$5.00** May Be  
 Added to Fees

U00000525763  
 05/04/06-80046-019 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD ROBEYNS, MARC A 2839 NW 28TH AVENUE LIGHTHOUSE POINT, FL 330648218
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing 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:** \_\_\_\_\_      **20 APRIL 2006**      **954 682-7233**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #