

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P94000064488 (7)**

1. Corporation Name  
**BAVARIAN INVESTMENT, INC.**



Principal Place of Business: %EURO-AMERICAN CONSULTING, 3401 TAMiami TRAIL NORTH STE 207, NAPLES FL 33940, US  
Mailing Address: %EURO-AMERICAN CONSULTING, 3401 TAMiami TRAIL NORTH STE 207, NAPLES FL 33940, US

3. Date Incorporated or Qualified: **08/29/1994**  
3a. Date of Last Report: **03/02/1995**  
4. FEI Number: **65-0523996**  
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 has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business: 21. 400 Fifth Avenue S., # 300, Naples, FL 33940  
2a. Mailing Address: 26. 400 Fifth Avenue S., # 300, Naples, FL 33940  
22. # 300  
23. Naples  
24. FL 33940

9. Name and Address of Current Registered Agent: **GUDRUN M. NICKEL, P.A., 350 5TH AVE. SOUTH, #200, NAPLES FL 33940**  
10. Name and Address of New Registered Agent: 81. Name: **JAMES AMBURN**, 82. Street: **5121 CASTELLO DR.**, 83. Suite #2, 84. City: **Naples**, FL 85. Zip Code: **33940**

11. Pursuant to the provisions of Sections 607.0402 and 607.1506, 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 607.0605, Florida Statutes.

SIGNATURE: *[Signature]* **Rainer N. Filtbank, Vice President** 1/17/96

12. OFFICERS AND DIRECTORS  
1. TITLE: **PSTD**  
2. NAME: **GROSSMAN, RUDOLF**  DELETE  
3. STREET ADDRESS: **776 ORCHID COURT**  
4. CITY-STATE-ZIP: **MARCO ISLAND FL 33937**  
5. TITLE: **Vice-President, Director**  DELETE  
6. NAME: **Doris Roman**  
7. STREET ADDRESS: **Josi Sandpiper Cir.**  
8. CITY-STATE-ZIP: **Naples, FL 33962**  
9. TITLE:  DELETE  
10. NAME:  
11. STREET ADDRESS:  
12. CITY-STATE-ZIP:  
13. TITLE:  DELETE  
14. NAME:  
15. STREET ADDRESS:  
16. CITY-STATE-ZIP:  
17. TITLE:  DELETE  
18. NAME:  
19. STREET ADDRESS:  
20. CITY-STATE-ZIP:

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1. TITLE:  Change  Addition  
2. NAME:  
3. STREET ADDRESS:  
4. CITY-STATE-ZIP:  
5. TITLE:  Change  Addition  
6. NAME:  
7. STREET ADDRESS:  
8. CITY-STATE-ZIP:  
9. TITLE:  Change  Addition  
10. NAME:  
11. STREET ADDRESS:  
12. CITY-STATE-ZIP:  
13. TITLE:  Change  Addition  
14. NAME:  
15. STREET ADDRESS:  
16. CITY-STATE-ZIP:

14. I do 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)(b), 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 officer 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 in an attachment with an address.

SIGNATURE: *[Signature]*  
SECRETARY AND TREASURER OR REGISTERED AGENT OR OFFICER OR DIRECTOR

CR2E034 (12/95)